# PAGE NUMBER:

W 1901

# NOT SUBMITTED

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Janua Committee to R PO Box 2569

THE MUNICIPALITY U	ISED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Wiadison, WI 55
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT
1.  Print: Sarah Cleve land  sign: South Chelul	Street: 1423 W.1d Ivis St	Town Village City  Sun Prairie (Municipality Name)	11 /15/20 <u>//</u> (Month) (Day) (Year)	Phone
2. Print: Marka Nelson	Street: 11 W. Wilson #810	□ Town □ Village	11 /20/2011	Email
si Cmata I nel	City: Madison Zip: 53703 POBOX 441	Madison (Municipality Name)	// /5/20 // (Month) (Day) (Year)	Phone ( )
Print: Kathy FAAS sign: Kathy Faas	street: 6753 Surset Weathu	Town   Village   City		Phone
4. Print: Heid: Herziger	city: Windsor zip: 53598  Street: 1220 Jeniff St	(Municipanty Name)  □ Town □ Village		Email
sign: Had J	city: Madson zip: 53703	(Municipality Name)	11 /15/20(Month) (Day) (Year)	Phone ( )
Print: Larry Hayes Sign: Lavry Hayes	Street: 540 W. Olin Ave 136	□ Town □ Village 又 City  Macdi san	1 /5 /2011 (Month) (Day) (Year)	Phone
Sup Alinto	Certification of Circulator Certify): I reside at TOS W. By H 1/19 M	(Municipality Name)  amP Madlsh	7	
(Printed Name of Circulator)	(Circulator's Residence – Street Name and Nu		icipality)	Circulators, Please include your contact.

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this

an pengon, i am	aware that taisitying	uns cermication is punisr	able upater 5.12.13(3)	)(a <sub>1</sub> , w <sub>1</sub> s <sub>3</sub> Stats.
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			: A / • .	1 A A A I I I I

(Month) (Day) (Year) (Signature of Circulator) Page No. (Official Use Only)
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Please include your contact Phone Email

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Casey Saumann  Sign: UM M	street: 504 E. Dean Ave  City: Madison zip: 53716	Town Village City (Municipality Name)		Phone ( )
Print: SCOTT & AUEN	Street: 5515 W. MARTIN DR#Z	Town		Phone ( )
sign: SCID. help	street: 5964 Prairie Wood Dr.  City: McFarland Zip: 53558	Town  Notitiage City  Mc Farland  (Municipality Name)	// /15/20 <u>//</u> (Month) (Day) (Year)	Phone ( )
Print: Ran Cubel Sign:	street: 113 Cherry St.  city: Edigeton zip: 53534	Town Village City  (Municipality Name)	(Month) (Day) (Year)	Phone ( )
5. Print: Shama (nobel	street: 1/3 Cherry St City: Edger In Zip: 53534	Town □ Village □ City (Municipality Name)	(Month) (Day) (Year)	Phone ( )
I, Printed Name of Circulator)  I personally circulated this recall petition and personally on named in this petition. I know that each person signed the recall petition. I am aware that falsifying this certification	(certify): I reside at Circulator's Residence – Street Name and Numbrained each of the signatures on this paper. I know that the signers are elector paper with full knowledge of its content on the date indicated opposite his or is punishable upder S.12.13(3)(a), Wis Stats.	rs of the jurisdiction or district represented by the	ne officeholder	Circulators, Please include your contact Phone

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· · · · · · · · · · · · · · · · · · ·	nstitution and S.9.10 of the Wisconsin Statu PURPOSES, WHEN DIFFERENT THAN MUNICIPALE	TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
Monica Harrison	Thorica Harrison	Street: W11974 County Rd W City: Baraboo, W1 21p.53913	Trown Village City Caledonia	// //6/20//_ (Month) (Day) (Year)
2. DICHARD W. HRRISD	Lecton M. Horrison	Street: 11974(0.2) 4. City: J200 ABDU W zip: 53913	Trown City 4/20010	1/16/20/(Month) (Day) (Year)
Jim Deering	Dim Pearing	Street: 5702 Det 50tt Dr. City: Madison Wis Zip: 53711	Town Village Madison	[[ / 16/201] (Month) (Day) (Year)
Dolores J. Meiller	Dolorey meille	Street: 562 middle bury Pl.  City: Madison W; zip: 53716	Town Utillage Decity  Mad SON	i//4/20_1/ (Month) (Day) (Year)
Nancy Meiller	Hany Meiller	Street: 5365/ANBONT Tree De City: Baraboo WI zip: 539/3	City Fairfield	11 /16/20
6. Autel m	J.M. POSIKI	Street:  City: Zip:	☐ Town ☐ <del>Uthage</del> ☐ City	(Month) (Day) (Year)
Jm westnick	Sun Westudo	Street: 310 H Ruge City: Openiou: He 52; HU,	Town Village City  City	1/ /(4/20 <u>)</u> \(\frac{1}{20})\(\frac{1}{20}\)
	Marly Warber	street: 0137 Cherry St City: Edgerton, wy zip: 53534	Town City Edgerton	1 /6 /20/1 (Month) (Day) (Year)
Larry W. Schlen	Sary wollen	Street: 144 Cherry ST. City: Flyarion WTzip: 57534	Town Village Park Elgerton	////٤/20 <u>//</u> (Month) (Day) (Year)
David Pross	DIR	Street: 409 W. Croshum St. Aprillos  City: Marcison WI zip: 53703	Town Village Wall (S61)	(Month) (Day) (Year)
Diane Oken (Name of Circula		of Circulator  fy): I reside at		
onally circulated this recall petition and personally obtain per with full knowledge of its content on the date indicated in the date indicated in the date indicated in the date in the d	ated opposite his or her name. I know their respective t	he signers are electors of the jurisdiction or district represented by the positive given. I support this recall petition. I am aware that falsifying	officeholder named in this petition. I know to the sertification is punishable under S.12.  Page No. (6)	13(3)(a), Wis. Stats.

(Signature of Circulator)

(Day)

**\*** 

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Ja

Committee to PO Box 2569

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NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA
1. Andy Greet Sign: and Greet	street: 2730 In-quelyn Drill	Filchburg	(Month) (Day) (Year)	Phone
2. Tan Olszewsky sign: Tom Olypusky	1415 Wedgewood Drive street: Watertown 53098	Town Village City  Watertown (Municipality Name)	(   /     / 20       (Month) (Day) (Year)	(((0))
3. Ashley Toy sign: ashles Doz	Street: 2305 UNESITY ALAPTS  City: Myd367 Zip: 53726	Town Usillage City (Municipality Name)	// / / 20 <u> </u> (Month) (Day) (Year)	Phone (414)
4.  Print: Benjamin Krunner  Sten: Benjamin Krunner	street: 7679 Granwigh Rd	Town Uillage City  (Municipality Name)	11/16/2011 (Month) (Day) (Year)	Phone (C3)
5. ROSALIW) LEVW Stalind Form	Street: Street: MADISON, WI 53705	Town Village  AD1503  (Municipality Name)	///6/20 <u>1</u> (Month) (Day) (Year)	Phone (G & 8)
I, Dian Olsen (Printed Name of Circulator)	Certification of Circulator (certify): I reside at 2524 Targhte SA (Circulator's Residence - Street Name and No	City of Fite unber) acirculator Mun.	hburg icipality)	Circulators, Please include your con

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Julith Bakkon	Street: 4813 Halilay Do.	□ Town □ Village  □ City	(//IG/20 <u>11</u>	Email
sign: Skilled Bikker	city: Madesor Zip: 53711	(Municipality Name)	(Month) (Day) (Year)	Phone (WS)
Print Gul Bennstein	Street: 5913 Williamsburg W.	□ Town □ Village City	11 /K/20 <u>:1</u>	Email 607
Sign: Paul Bernt	city: Madica WI zip: 537Ff	(Municipality Name)	(Month) (Day) (Year)	Phone (())
3. Print: Neil Boinston	Street: 1825 Helidzy Dz	□ Town □ Village □ City	11/11/202011	100
sign: W Kerut	City: Med, 5- WIZip: 53711	(Municipality Name)	(Month) (Day) (Year)	( 6 ( 5)
4. Print: Jeven Wilse, Tepeli	Street: 538 W Washington	□ Town □ Village □ SCity	N /\c/20 <u>11</u>	Email
Sign: John Challe Sq-	city: Madison zip: 53763	(Municipality Name)	(Month) (Day) (Year)	Phone (Sun)
5. Justin Haray	Street: 2929 Fish Hatchery Rd	□ Town □ Village   City	11/11/2011	Email
Sign: JANA	city: Frtchburg zip: 53713	Munidipality Name)	(Month) (Day) (Year)	Phone $(\mathcal{L}\Sigma)$
	Cortification of Circulator	$\rho_{1}$	^\.	
. Diese Olses	2521 Tarakee A.	City of	-itch buck	

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this

(Printed Name of Circulator)

(Circulator's Residence - Street Name and Number)

call petition. I am awa	are that falsifying	this certification is punish	able under S.12.13(3)(a), Wisk Stats.	
	16	/20/	Sean On	Page No. (Official Use Only)
(Month)	(Day)	(Year)	(Signature of Circulator)	# <u>/ / / / / / </u>

Circulators,

(Crculator Municipality)

Return by Jan

Committee to

PO Box 2569

Please include your con Phone

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. ANN L. Koski	Cenu X Koshi	street: 2520 Targher St City: Fitchburg zip: 537/1	Town Village Fitchburg	///5/20_11 (Month) (Day) (Year)	Email Phone
Jane Lyons	Jane Lyon	street: 2527 Targhee St City: Fitchburg Wl zip: 53711	Town Village Fitchburg	11 /15/20 11 (Month) (Day) (Year)	Email Phone
3. Kathleen(arufe)	Kathleen (aryle)	Street: 233 Walnut #4 City: Oregon WIZip:53575	ATown □ Village □ City □ City	(Month) (Day) (Year)	Email
1) iane Olsen	dune Cla	Street: asaf Targher St.  City: Fitchburg WI zip: 53711	Town Village Fitchburg	// /6/20_/ <u>/</u> (Month) (Day) (Year)	Phone
Jackson Dahlquist	Jackson Jahlquist	City: Madison Zip: 53703	Town Village Madison	(Month) (Day) (Year)	Email Phone
Michelle Weiss	rechellewsess	Street, 510957 Dane Hill CHSSpring Green, WI zip. 53588	Drown Bear Creek		Email Phone
7. Matthew Rock	Maucher Nor Q	Street: 3/6 N Busles Apr 503 City: Madisis Zip: 53703	Town Village Mad 150M	// // 6/20 1 (Year)	Email Phone
Sonathan Wiciat	alle	street: 412 Valeria Pr City: De Forest zip:53532	□ Town □ Village □ City De Forest	(/ //G/201/ (Month) (Day) (Year)	Email Phone
9. Emily Leuther	E	Street: 116 Peerless nd City: Whi Slows WI zip: 53574	Otown Primo Sc.	(Month) (Day) (Year)	Email Phone
DAMES BINGHAM	Mrs Bil	Street: 414 La Belle Land City: Manura W. zip: 53716	Town Usilage City Menona	////C/20 <u>//</u> (Month) (Day) (Year)	Email Phone
NI.	Certification		PI C	Thai	
1) 1ane Ulser	, (cert	ify): I reside at 2524 Targhe St. (Circulator's Residence - Street name an		Municipality)	Cir

I. Diane Olsen	Certification of Circulator , (certify): I reside at 2534 Targhie St.	City of Fitch burg
(Name of Circulator)	(Circulator's Residence – Street name and Number)	(Urculator Municipality)
	gnatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder na	
the paper with full knowledge of its content on the date indicated opposite his or	her name. I know their respective residences given I support this recall petition. I am aware that falsifying this certifica	tion is punishable under S.12.13(3)(a), Wis. Stats.
11 , 16 ,20 (1	Oligne Cles	Page No. (Official Use Only)
(Month) (Day) (Year)	(Signature of Circulator)	# <u>1907</u>
	<b>∞√</b> 2009	1

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

· · · · · · · · · · · · · · · · · · ·	Institution and S.9.10 of the Wisconsin Statu			<del></del> -
THE MUNICIPALITY USED FOR MAILING	J PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT	TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE M		S BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. MICHAEL J. HEMPEL	Mihaul Hampel	Street: 2704 ELINWOOD CHALL City: PRUSS PLAINS, WIZIP: 53528	City (RUSS YLAINS	///6/2011 (Month) (Day) (Year)
MICHAEL J. HEMPER Cecelia Hempel 3. MICHAEL KLINKHANNE	sulin Ampel	Street: 2704 Elm 10000 Circleto City: 01055 Planus W / Zip: 53520	Town Village NOS-HO'. 11C	(Month) (Day) (Year)
3. MICHAEL KLINKHANDE	Mikku	Street: 2603 Fairfield of City: Madison Wi zip: 53714	Town Village City  Modelis	(Month) (Day) (Year)
4.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
5.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
6.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
7.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)
8.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
9.		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
10.		Street: City: Zip:	☐ Town☐ Village☐ City	/ /20(Month) (Day) (Year)
<u> </u>	Certification o			
Diane Usen (Name of Circul onally circulated this recall petition and personally obt		ify): I reside at <u>2534 Targhle</u> (Circulator's Residence – Street name of the signers are electors of the jurisdiction or district represented by	and Number) (Circulator 1	Titch burg Municipality) hat each person signed
	cated opposite his or her name. I know their respective r	résidences given. I support this recall petition. I am aware that falsi	fying this certification is punishable under S.12.  Page No. (c	.13(3)(a), Wis. Stats.  Official Use Only)
(Month) (Day) (Voor)	_	(Signature of Circulator)	<u> </u>	Ø :

(Month)

(Day)

(Year)

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Committee t PO Box 256

Return by J

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1. Print: De CV Sign: De CV	Street: 6/20 Gutury Aus City: Mibbleto, Zip: WI	Town Village City (Municipality Name)	(Month) (Day) (Year)	Phone ( )
Print: Carl Molizio  Sign: Carl Malyier	Street: 5 Countland Circle  City: Mailson Zip: WI	□ Town □ Village ☑ City  (Municipality Name)	Month) (Day) (Year)	Phone ( L )
3. Print: Vr Grand Hund	Street: S Contract Circle  City: MAdis > Zip: W.T.	Town Village City (Municipality Name)	(Month) (Day) /20 (Year)	Phone (3)
4. Print Branden Langet of	Street: 1518 Steensland Dr. City: Madison Zip. W/	Town Village City (Municipality Name)	(Month) (Day) (Year)	Phone (CC)
5. Print: Linda Join Sign: Andr. Join	Street: 614 W, DOTY ST 3025 City: Madison zip: WT 5770	(Municipality Name)	(Month) (Day) (Year)	Phone (651)
Dia Mes	Certification of Circulator	Cit- A E	tchborg	
I, Owner of Circulator), (	(certify): I reside at 3524 Targher Street Name and Nu			Circulators,

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

61	16	/20_//	Page No. (Official Use Only)	)
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Phone

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Article XIII, Section 12 of the Wisconsin Co	nstitution and S.9.10 of the Wisconsin Stat	utes.			
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doseph DBalozeust	Local D Ball with	Street: 28/9 Hollister AUE, City: MadisonWI. Zip.W.J.	□ Town □ Village □ City  M Ad. SUN	11/15/2011 (Month) (Day) (Year)	Email Phone
Larry Zehver	Buy John	- 0// 0/ 0	Town Usuage Dicity Madison	///5/20_// (Month) (Day) (Year)	Email Phone
JOYCE CAREY	Jayce Cary	Street: 913 HARRISON ST  City: MADISON Zip: 53711	Town Village QCity  MADISON	///5/20// (Month) (Day) (Year)	Email Phone
Shirley Brenner	Sherley Grenner	Street: 217 Drand Congon Dr. City: Marison, W/ Zip: 53705	□ Town □ Village Madison  M City	// //S/20// (Month) (Day) (Year)	Email Phone
Ardis Cottman	Adio Coffman	Street: 6001 Hammersley Rd City: Madison, WI zip: 537/1	Town Village Modison	11   15   20 11 (Month) (Day) (Year)	Email Phone
Hannah Pinkerton	Hannah Pinkertor	street: 1212 Shoulwood  City: Madison WI Zip: 53705	City Show wood	// /5/20// (Month) (Day) (Year)	Email Phone
Carolyn Waxler	Carolyn Waxler	Street: 1920 Arlington P1.  City: Madison, WI zip: 53726	Town Village Mad 1500	11/15/20// (Month) (Day) (Year)	Email Phone
8. Robert Radford	RRM	Street: 504 Melody Ln City: Verma WI zip: 52593	Town Village Verma	11 /6 /20(	Email Phone
Duicie DOBSON	(1/Non)	Street: 1202 MCKENNA BLAD #302 City MADISON WI Zip: 53719	□ Town □ Village □ City    MAN   SO   V	// /6/2011_ (Month) (Day) (Year)	Email Phone
10.		Street:  City:  Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)	Email Phone
	Certification	of Circulator	_		
ROBERTA ZEHNE) (Name of Circumstant)	lator)	ify): I reside at Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the	d Number) (Circulator I		Circ

SCOTT WALKER RECALL PETITION

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1. DALE JOHNSON -NPG	Dale John -	street: 1136 Morraine VICW  City: Madison WI zip: 537/9	Town String MADISON -1196	1///5/20 <u>t/</u> (Month) (Day) (Year)	Filone
2.	Zend A. Leavi	street: 1034 McKenna Blud.  City: Madison WI zip: 53719	Town Usillage WANTSON-NPC	11 /15/2011 (Month) (Day) (Year)	Email
3. Orton Greg - 286	Orton I Gray	Street: 6214 SCHROEDER R. 53711 City: M ADISON WJ Zip: 53711	Town WHOTSON- NPG	11 /15/20 <u>11</u> (Month) (Day) (Year)	Email Phone
4. Tyler Johnson-nag	Tyles Johnson Benee Saenders	Street: 6202 Strathmore Ln-	Town Willage MAdison - NPC	11 /15/20 11 (Month) (Day) (Year) 6	Phone
5. Rome SANDERS- NEG	Bener Saenders	Street: 825 Johnson St City: Stoughten zip: 53589	Town Village Stoughton-NPG	///15/20 <u>//</u> (Month) (Day) (Year)	Email Phone
<b>6.</b>		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)	Email Phone
7.		Street: City: Zip:	□ Town □ Village □ City	/ /20 (Month) (Day) (Year)	Email Phone
8.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)	Email Phone
9.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)	Email Phone
10.		Street: City: Zip:	☐ Town ☐ Village ☐ City	//20 (Month) (Day) (Year)	Email Phone
Vick Gallenberg	Certification (		22 vijv ct		

			City:	Zip:	☐ City	(Month) (Day) (Year)
10.			Street:		☐ Town ☐ Village	/ /20_
			City:	Zip:	☐ City	(Month) (Day) (Year)
11		Certificati	ion of Circulator			City of
Nick	GAllenberg		, (certify): I reside at	Morraine	View DR#202	MADISON
	(Name of Circu	alator)	(Circu	lator's Residence – Street		(Circulator Municipality)
		tained each of the signatures on this paper. I know cated opposite his or her name. I know their resp				
- 11	/_/6 /20 \\	7//				Page No. (Official Use Only)
(Month)	(Day) (Year)		(Signature of Circulator)			# <i>1911</i>
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING	FURPOSES, WHEN DIFFERENT THAN MUNICIPALI	TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
<sup>1.</sup> Barbara Malone	Barbara Malone	Street: 6617 Sutton Road City: Madison, WI Zip: 53711	Town Village City  Madison	15 /2011 (Month) (Day) (Year)
2. Bridget Hofstachter	Budge Heladt	Street: 923 Drake St#2 City: Madison WI zip: 53715	Town Village Madi Son	11/15/2011 (Month) (Day) (Year)
3.5 ABIL BALSOUN	SN V	Street: L709 DANLE City: MNN SON Zip: 5370L	Town Uvillage Ucity  WAN SO	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Sarah Byrns-Grindro	2 DRAG	Street: 2376 West Lauraia.  City: Madisin WI zip: 53711	Town Utiliage Wals	t1 /15/201/ (Month) (Day) (Year)
SUSAN W. Cook	Swan W. Cook	street: 6617 Boulder Lane  City: Middle ton, W1 zip: 53562	Town Usuage Middleton	11/15/2011 (Month) (Day) (Year)
Martha E. White	Markal St.	Street: 2706 Badger Lane City: Madison, WI zip: 53713	Town Village Madism	11 /15 /20 11 (Month) (Day) (Year)
7. CHRISTOPHER J. REYNOUS	Wide Done	City: MADISON, UI Zip: 5371	☐ Town ☐ Village ☐ City MADIS ON	)( / 15/2011 (Month) (Day) (Year)
8. Robert B. Scheele	Hat B. Scheele	Street: 1206 Frisch Rd  City: Madison WI zip: 53711	□ Town □ Village □ City  Madison	///sf20// (Month) (Day) (Year)
Linda Levey	Lunda Levey	Street: 6613 Sutton Rd City: Madison W zip: 53711	Town Village Madison	///5/20// (Month) (Day) (Year)
Dana Joseph	Lana Joseph	Street: 6613 Sutton Rd City: Madison WI zip: 53711	Town Village Madison	
Barbara 5. Malone	Certification o	of Circulator fy): I reside at <u>6617 Sutton</u> Rd.	city of 1	Madison

J .		City: Macel Son Vol Zip: Joll J	1		
3.5 ABRINASOUN	Sor Vi	Street: 1709 DANLE  City: MANN SON Zip: 53701	Town Usullage UCity  WAN SO	1 1/1 1/20/( (Month) (Day) (Year)	Email Phone
Sarah Burns-Grindro	DADRAGO	Street: 2376 Wort Lauraia. City: Madim WI zip: 53711	□ Town □ Village City Was Com	11 /15/20// (Month) (Day) (Year)	Phone & OS(
5. SUSAN W. Cook	Swan W. Cook	street: 6617 Boulder Lane City: Middleton, W1 zip. 53562	Town Stillage Middle for	(Month) (Day) (Year)	Email Phone
Martha E. White	Markal H	street: 2706 Badger Lane  City: Madison, WI zip: 53713	Town Village Madism	11/15/20 <u>11</u> (Month) (Day) (Year)	Email Phone
7. CHRISTOPHER J. REYNOUS	( printing	Street: 1519 CHANDLERST, #3  City: MADISON, U1 Zip: 53711	☐ Town ☐ Village ☐ City MADIS 0~	1( / 15/2011 (Month) (Day) (Year)	Email Urba Phone
Robert B. Scheele	Hoat B. Scheele	Street: 1206 Frisch Rd  City: Madison WI zip: 53711	□ Town □ Village ■ City  Madison	///s/20 <u>//</u> (Month) (Day) (Year)	Email Phone
"Linda Levey	Lunda Levey	street: 6613 Sutton Rd City: Madison W zip: 53711	Town Village Madison	///5/20// (Month) (Day) (Year)	Email Phone
Dana Joseph	downa Joseph	Street: 6613 Sutton Rd City: Madison WI Zip: 53711	Town Village Madison	11/15/20 <u>11</u> (Month) (Day) (Year)	Email Phone
	Certification (	and the second s	A		
Barbara S. Malone		ify): I reside at 6617 Sutton Rd.		radison	Circu
(Name of Circul personally circulated this recall petition and personally obta		(Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the			
	cated opposite his or her name. I know their respective	residences given. I support this recall petition. I am aware that falsifyi			}
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(Month)

(Day)

(Year)

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURA Rural address must also include bo		VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
Marilyn Penn	Mary Ly	street: 555 Tancho Driv		Town Village City  Madison	11 /16/2011
· .		City: Madison	zip: 53718	City Mad 150N	(Month) (Day) (Year)
Christine Stark	Christine Stark	Street: 960 Chrence (	2+#/	Town Village Madison City	// //6/20 <u>//</u>
		city: Madison	Zip: () () () ()	City -	(Month) (Day) (Year)
C 1 /110/0 0	Sandra Wolling	Street: 1010 Van Buren City: Madison, WI	st. :	Town Village City  Maduson	11 /16/20/11
Janora Wolens	Sanara Would	City: Madison, WI	zip:53711 P	City Maduson	(Month) (Day) (Year)
Sandra Wolens Ann Fahey	Ann Faher	Street: 4410 Reating To	errace :	Town Village	11/14/2011
Milliona p	21) IN Variley	city: Madison		enty Madison	(Month) (Day) (Year)
	U	Street:		Town Village	/ /20
		City:		City	(Month) (Day) (Year)
•		Street:		Town	/ /20
		City:		Village City	(Month) (Day) (Year)
•				Town	1 100
		Street:		Village City	/ /20 (Month) (Day) (Year)
		City:	Zip:		(Carrier) (Day) (Teal)
•		Street:		Town Village	/ /20
		City:		City	(Month) (Day) (Year)
•		Caty :		Town	1 1
		Street:		Village	/ /20_
		City:	Zip:	City	(Month) (Day) (Year)
0.		Street:		Town	/ /20_
				☐ Village ☐ City	(Month) (Day) (Year)
		City: 1 of Circulator	Zip:	, city of	

Sandra Wolens Sandra Wolens  Some 10/0 Van Buren St.   Town   Occupied Madison   11 / 1/20 11   Occupied One) Occupied O			City: Madison Zip: 537	15 × City	(Month) (Day) (Year)	
Servet	1	Sandra Wollus	Street: 1010 Van Buren St.	Town Village City	-110 410	
Street:	4. Ann Fahey	Ann Faken	Street: 4410 Keating Terrace City: Madison Zip: 53	Town Village		·   ·
Screet:   Town   Village   City   City   Country   Cream   Phone   City   City	5.		Street:	☐ Town ☐ Village		
8.    Street:   Town   Willage   City   Notesth (Day) (Year)   Phone	6.			— □ Village		4-2-
Street:    Gity:   Zip:   City   City:   City:	7.			□ Village	ļ , , <del></del>	
Street:    Town   Village   City   City   Phone	8.			□ Village		
Street:    Town   Village   City   Phone	9.			— □ Village	ı , , <del>-</del>	
(Name of Circulator)  (Circulator's Residence – Street name and Number)  (Circulator Municipality)  (Circulator Street name and Number)  (Circulator Street name and Number)  (Circulator Municipality)  (Circulat	10.			— □ Village	' '	
ersonally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.		<u></u>	ertify): I reside at <u>6617 Sutton</u> Rd			Circu
	ersonally circulated this recall petition and personally of paper with full knowledge of its content on the date ind	btained each of the signatures on this paper. I know the licated opposite his or her name. I know their respectively.	nat the signers are electors of the jurisdiction or district represente tive residences given. I support this recall petition. I am aware that	d by the officeholder named i	n this petition. I know that each person signed punishable under S.12.13(3)(a), Wis. Stats.  Page No. (Official Use Only)	

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING	G PURPOSES, WHEN DIFFERENT THAN MUNICIPALI	ITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	NCIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
Bill C. Malone	Bill C. Malone	Street: 6617 Sutton Road City: Madison Zip: 53711	Town Bcm Pillage Medison	// //5/20// (Month) (Day) (Year)
2. DAUE ROBERTSON	Devel Palithon	Street: 2606 ARBOR DR. #222 City: MADISON Zip: 537//	□ Town □ Village  City Madison BCM	// //5/20// (Month) (Day) (Year)
3. Sam Wegleitner	Sitt	street: 204 N. Livingston St. City: Madison Zip: WI 53703	□ Town □ Village □ City Medison  B CM	(Month) (Day) (Year)
4. Norman Stockwell	in	Street: 401 ELASIDE BLUD  City: MADISON WE Zip: 53704	Town Uvillage madison BCM	// /5/2011 (Month) (Day) (Year)
Fichard Gilbert	Mend Callot	Street: 4002 Major Ave City: Madison zip53716	□ Town BCM □ Village workson ■ City	[1] /15/20 <u>11</u> (Month) (Day) (Year)
Alex Wilding-L	hire San allamalla	Street: 85. State St. Acity: Mazomanie W zip: 53560	Town BCM  City Mazomorie	
546il Augustine	Syll M. Att	Street: 149 Talmadge Str City: Madison Zip: 53764	Town BCM Sch	
Elenn Mitroff	Donn Kutuff	Street: 1516 Lynchburg Trail City: Modison zip: 53718	Town Brillage Madison B(M)	11/15/20_11 (Month) (Day) (Year)
Rebekah Rickner	Rebeloh Ricken	Street: 10 Parklawn Place City: Madison zip: 537as	□ Town Prom Prom Prom Prom Prom Prom Promy	//////////////////////////////////////
Jess Gilbert	Tex Gubert	Street: 720 E. Gorhan #302 City: Madeson zip: 53702	Town RC m	11 /15/20 <u>11</u> (Month) (Day) (Year)
	Certification (	of Circulator		
Onally circulated this recall petition and personally other with full knowledge of its content on the date indicated the content of	lator) ained each of the signatures on this paper. I know that t	ify): I reside at 6/7 Sutton Rd (Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the residences given. I support this recall petition. I am aware that falsifyi	officeholder named in this petition. I know th	at each person signed
the state who wedge of its content on the date make	D: 11	200 - 0	r	=======================================

(Signature of Circulator)

(Day)

(Year)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Alaw P. STAUBback	Alon Stanffren	Street: & 72 - 10th Ave. City: New Glann W: Zip: 5-75	Town BCM  Brillage. W  City Gloves	////5/20j/ (Month) (Day) (Year)	Email ASI Phone
Hope A. Hague	Hope a. Hague	Street: 1426 Drake St. City: Madison, WI zip: 537/1	Town Village Mades on	// //6/20 // (Month) (Day) (Year)	Email ha
3. LAURA GUTKNECHT	Lama Muthech	Street: 315 S. BROOKS ST. #1 City: MADISON Zip: 53715	Town Village MADISON	\(\langle \frac{\lambda}{\log \log \log \log \log \log \log \log	Phone (
Elizabeth Dinovella	Elgu Dy hun	Street: 570 S DICKINSON  City: MADISON  Zip: 5318	Town Village  RCity  MADISON	(Month) (Day) (Year)	Email Phone
5. RUKMINI VASUPURAM	Ryasupuram	Street: 308 W WILSON ST #4  City: MADISON	Town Village City  MADISON	// 16/20 <u>11</u> (Month) (Day) (Year)	Email Y (
6. Jan Miyasaki	July	Street: 2830 Stevens St.  City: Madison zip: 53703	Town Village City Madison	(Month) (Day) (Year)	Email /
steven Daggett	For Myself	Street: 2408 LISOLN City: Fitchburg zip: 53711	Town City Fitchburg	///6/20/1 (Month) (Day) (Year)	Email Phone
*Richard L. Bram	Will. Ben	Street: (15 N/tame) ton 57 # 1001 City: Madroon 21p: 53703	Town Village Ocity  Madison	(Month) (Day) (Year)	Phone
TonyA L. Brito	Jox But	Street: 1925 West LAWN Are City: MAdison WI zip: 53711	Town Village MACUSO A	// 20 (Month) (Day) (Year)	Email Phone
Heather A Gerbyshau Heather a Gulysh	Hooden a. greydy	Street: 418 W Olin Ave #2  City: Madison Wi zip: 52715	□Town □Village □City  Madison	// //6 /20// (Month) (Day) (Year)	Email  h g  Phone
Dill C M 1 .	Certification of	of Circulator		1.	
Bill C. Malone	, (certi	fy): I reside at 66/7 Sutton Rd	City of h	nadison	Circu

(Name of Circui	iator)	(Circulator's Residence – Street name and Number)	, <b>/</b>	(Cir <b>cu</b> iator Municipality)	
I personally circulated this recall petition and personally obta	ained each of the signatures on this paper. I know the	at the signers are electors of the jurisdiction or district represented by the officeholde	r named in this p	etition. I know that each person si	gnec
the paper with full knowledge of its content on the date indic	cated opposite his or her name. I know their respecti-	ve residences given. I support this recall petition. I am aware that falsifying this certi	fication is punish	able under S.12.13(3)(a), Wis. Sta	ıts.
// / /6 /20 //	Bill C	Malone	i-	Page No. (Official Use Only)	-!
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(Month)

(Day)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S 9.10 of the Wisconsin Statutes

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1. Mastachia Har	nger I of with	City: Madison Zip: 53703	Town Village Madisongat	//5/20/(Month) (Day) (Year)
2 Phssell Reid	ensell poir	Street: 603 Vefa Ct. City: Maliso _ Zip: 53704	Town Village Madison Jan	(Month) (Day) (Year)
3. Josie Freeman	Brie Freeman	Street: 424 North Paterson City: Madison Zip:53703	Town Village Mudison Jak	//\$\frac{1}{20_{\text{(Month) (Day)}}}
4. Suzanne Murphy	Sujanne Murphy	street: 342 Nygaard St City: Oregon WI zip: 53575	Town Village Ovegon	11 /15/2011 (Month) (Day) (Year)
5. an anly Marilyn	Typsen Marpe	Street: 5461 VICAV Lauc City: Malison WI zip: 53714	Town Village Madison	/////20 <u>((</u> Month) (Day) (Year)
6. Jeffrey Richter	Jeffrey J. Richter	Street: 2109 Cliff Ct.  City: Madison zip: 53713	Wrown   Village   Madism	///5/20_// (Month) (Day) (Year)
7. GAZGORY GRORG	Jan 1 Hen	Street: 5008 W. Bruz Mound Ro.  City: MILWAUKEZ Zip: 53208	D Town Village City MILWAUKEE	
8. SARAH TENIENTE		Street: 512 DAVIDSONST, City: MADISON Zip: 53716	Town Village MANSM	/\5/20_\(\ldots\) (Month) (Day) (Year)
o. MAYUA MASSE	WAR	strept & Wooping Birch CV	Town Village MALSI & Con	// /5/20//_ (Month) (Day) (Year)
Ann Sexton	au Sisto	Street: 1443 Spaight St City: Madi SON, WI Zip: 53703	Town Village City  Madison	
Jul A. Hynum	Certification of	776 youth /	liduale City of	Mudison

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

THE MUNICIPALITY USED FOR MAILING	nstitution and S.9.10 of the Wisconsin Stat From Purposes, when different than municipal.	IHES. ITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.	
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1. Holly Telfer	Holly Zelfer	Street: 7457 Franklin Ave. City: Middleton Zip: 53562	Town Village Middleton	11/15/20_1L (Month) (Day) (Year)	Email C Phò <del>ne</del>
John Landmann	Sanlandmann	street: 7457 Franklin Ale city: Middleton zip: 53567	Town Village Wildeley Middle	11/15/2011 (Month) (Day) (Year)	Email Phone
Donna M. Edera	Donna M. Ederer	Street: 829 N Gammon 12d City: Madison 53717 Zip: WI	Town Village Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
John Henning	Som Denning	street: 5555 Midure Blud  City: Madison zip: 5371407	Town Village Proity Madison	Month) (Day) (Year)	
NICKIA, MCGREW	Duki a. M. hen	Street: 555 5. MIDVALEBIND 407 City: MADISON Zip: 53711	Town Village City Walistin	////6/20// (Month) (Day) (Year)	Email Phone Email
"Megan Prime	YOU	Street: \$207 Diamond in city: 6001, WI zip: 53555	Town COOUSE SCIENCE LOCALSON	//////////////////////////////////////	Phone
7. Q. Jean Frank	9. Jan Frank	Street: 10 E, Geneva Cucle City: Madison, WI zip: 53717	Town Village	///6/20 <u>//</u> (Month) (Day) (Year)	Phone
8. Kothenne Foley	Kah M Jely	Street: N9016 York Center Rd  City: Blanchardville zip: 53516	®Town ☐ Village ☐ City ☐ Vork	// // /20 <sup>1</sup> /_(Month) (Day) (Year)	Phone
"Wetner G. Frank	Merner & Frank	street: 10 E. Geneva Circle City: Madison WI zip: 53717	Town Utillage City Madison	11/16/20/1 (Month) (Day) (Year)	Phone
Rebecca J. Spencer	RJ Spencer	Street: 1012 N. HighPoint #208  City: Madison Zip: 537/7	□ Town □ Village  SCity - Madison	1) / 16/20_11 (Month) (Day) (Year)	Email
Katha Wolf	Certification, (cert	of Circulator ify): I reside at 4931 Hickory True	il town of	ingfield	Cit

	Certification of Circulator	· · · · · · · · · · · · · · · · · · ·
I Father Wolf	(certify): I reside at 4931 Hickory Trail	Town of right ield
(Name of Circulator)	(Circulator's Residence – Street name and Number)	(Circulator Municipality)
I personally circulated this recall petition and personally obtained each of the signatures of	n this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder nam	ed in this petition. I know that each person signed
the paper with full knowledge of its content on the date indicated opposite his or her name	e. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification.	on is punishable under S.12.13(3)(a), Wis. Stats.  Page No. (Official Use Only)
(Month) (Day) (Year)	(Signature of Circulator)	# <u>1917</u>
	on the second	

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Nancy A. Bruin	nancy a. Brins	Street: 939/ Union Valley Rd City: Black Earth zip 53515	No Town of CVOSS Uvillage City Plains	// //6/20// (Month) (Day) (Year)
KATHRYN E QUES	Kathryn E. aust	Street: 3238 String Vallay Fd.  City: Orbanillo W Zip: 5353	Unitown □ Village □ City United	//////////////////////////////////////
Eric Walk	Sin With	Street: 5/08 Rusting Odes Un City: McFarland Zip: 53558	Town Village City  Metarland	// //6/20_11 (Month) (Day) (Year)
Lex CAM. Oasin	Leresim. Dason	Street: 5177 MALONOY TR City: MADISON, WI Zip: 53711	Town Fithburg TO PCity MADISON	11 /16/2011 (Month) (Day) (Year)
Jessica Knight	assico Kingert	street: 5011 Camplen Mol  City: MGOUSON WI zip: 55716	Town Willage WALLS	// // // 20// (Year)
CAND/SMITH	Canda At	Street: 5116 Church St. City: McFayland zip: 5358	Town Willage City Man	Month) (Day) (Year)
DAWN LAITEX	Dain Laller	Street: 16 & WATER ST City: MONTE 110 Zip: 53949	Town Village VCity MONTE 110	11/16/20_11 (Month) (Day) (Year)
Joshua Meyer	Joshua R Hayer	street: 204 Saugrass C+ City: Warnakee zip: 53597	□ Town  M'Village □ City Warnakee	// // 20_11 (Month) (Day) (Year)
Jenny Edes-Pievoth	Jeny Des Pierett	street: 10 Greenwen Circle City: Madison zip: 53717	□ Town □ Village  SLCity  Madi Sto	) / //6/20_// (Month) (Day) (Year)
o. Neville Paul	Nunte Paul	street: 437 West Main Street #113  City: Madi Son Zip: 53763	Town Stillage City Madi Son	1 /16/20 1 (Year)
Kathy Wat		of Circulator (fy): I reside at 4731 Hickory		annaheld
nally circulated this recall petition and personally object with full knowledge of its content on the date indi	tained each of the signatures on this paper. I know that the	(Circulator's Residence – Street name ap he signers are electors of the jurisdiction or district represented by the residences given. I support this recall petition. I am aware that falsify	e officeholder named in this petition. I know the	nat each person signed 13(3)(a), Wis. Stats.

(Month)

(Day)

(Year)

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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"Melissa Hanna	Melissa Hanna	street: 2777 Lyman Ln city: Madison zip: 63711	□ Town □ Village □ City madisci?	11/16/2011 (Month) (Day) (Year)	Email Phone	
2. Jeremy Adams	Jay Alln	Street: 3120 VIEW 12 Zip: 53711	Town Village City mod SOM	(Month) (Day) (Year)	Email Phone	
1. Lyolyn Thompson	Eulyn Thompson	Street: 4/9 9th Due.	Town Village R'City	i////20_// (Month) (Day) (Year)	Email Phone	
5hirley Rauch	Shirty Rauch	Street: 5625 Staylich are No.	Village	// // /20// (Month) (Day) (Year)	Email Phone	
Will Harvey	willing R Honz	Street: 2116 Hollister Ale City: Madison zip: 5:3776	Town Village Madison	(Month) (Day) (Year)	Email Phone	
Brian Dowling	Bollen Jamling	street: 7532 Tree Lyne #2  City: Madison zip: 53717	□ Town □ Village □ City M 9d i S a M	(Month) (Day) (Year)	Email Phone	
Russ Pearson	W	Street: 10 N CII CAN VILOR #632  City: Madrian Zip: 537/9	Town Village City My discip	(Month) (Day) (Year)	Email Phone	
8. Cassie Mattei	CasaMati	Street: 227 BYDGUWGY City: WIS. DX US Zip: 53965	Town Village  City  Wis DOWS	// /20 <u>//</u> /20 <u>//</u> (Year)	Email Phone	
9. Kelsey Vanderstern	KelseyVandersteen	Street: 902 Kettke Dr Hg  City: Madison, WI zip: 53719	Town Village Madisum	11 /K /20 L1 (Month) (Day) (Year)	Email Phone	
Kutherine Allen	4. Oh	Street: 2017 Uphit Rd. City: Cottogs (TYTY2 Zip: 53527	Trown Willage CoHaje Grove	(Month) (Day) (Year)	Email Phone	
Kathy Wolf	Certification	of Circulator	Trail Tow.	~ A	<u>-</u>	

			City: (Ctt	iga (TYUY	マ zip: 5337	21 Fear		(Month) (Day) (Year)
			Certification of Circulat	er i		1	7	TOWN OF
[, _	Kathy	. Wolf	, (certify): I reside at	49:31	Hickory	Trail		5 Pringite
		(Name of Circulator)			s Residence – Street nam			culator Municipality)
pe	rsonally circulated this recall petition	on and personally obtained each	n of the signatures on this paper. I know that the signers are ele-	ctors of the jurisdic	tion or district represented l	y the officeholder nam	ed in this petition.	I know that each person signed
he j	paper with full knowledge of its co	ntent on the date indicated oppos	site his or her name. I know their respective residences given.	I support this recall	l petition. I am aware that fa	Isifying this certification	on is punishable un	der S.12.13(3)(a), Wis. Stats.
	NOU, 16	/20 \\	- Kata W	cdr			Pag	ge No. (Official Use Only)
	(Month) (Day)	(Year)	(Signature of	Circulator)			¦ #	1919
				U	145 TH Driver		I	

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes

THE MUNICIPALITY USED FOR MAILING	G PURPOSES, WHEN DIFFERENT THAN MUNICIPAL	LITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	IICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
LEVIN POLEY	Whole	Street: 10/2 W. HIGHPOLWT #208	□ Town □ Village	// /6/20_/( (Month) (Day) (Year)
"Erinn Monroe	Frenc Mine	city: MANTSON Zip: 33717  Street: 3533 Concord Ave.  City: Madison WI zip: 53714	Town Uvillage Scity  MadiSon	(Month) (Day) (Year)
Kenneth Miska	2 Mista	street 6413 Men do ta Aug city: Middle ton 535 W	Town Uvillage Softy  Middle to h	17 /16/2017 (Month) (Day) (Year)
Delbbie Garten	Oll	Street: 4932 Borchers Beach City: Wannahee zip: 53597	Town Uest Port	////20 <u>]/</u> (Month) (Day) (Year)
Ali Stone	Heistone	Street: 4932 BOYCHUS BEACH Vd City: Wannaker W/ Zip: 535,97	¥Town WESTPOVT □ Village □ City	// // /20 <u>[/</u> (Month) (Day) (Year)
Barb Puls	Barb Juls	Street: 1610 Waple St. City: Med Weyn WI zip: 535/2	Town Village Wallet Fu	// //6/20// (Month) (Day) (Year)
Carly Deibler	'Carly Deible	Street: 8 N Franklin St City: Madison, WI zip: 53703	Town Village MadiSon	
Adam Marsh	Ada Maral	Street: 8 N Franklin St any Madison WI zip: 53703	Town Village Madison	M /16/2011 (Month) (Day) (Year)
JOHN GREET	John Great	Street: 1517 Edgehill Drive  City: Maison, Wi zip: 53705	Town Servillage Sherwind Hills	// /20 <u>11</u> (Month) (Day) (Year)
o. Kurt Heilman	207	Street: 4704 Schofield St.  City: Monona zip: 53716	Town Village Wows	(Month) (Day) (Year)
1	Certification		in Town of	
Name of Circul ally circulated this recall petition and personally obta r with full knowledge of its content on the date indic	lator) ained each of the signatures on this paper. I know that	(Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the	d Number) (Circulator Months officeholder named in this petition, I know the	Aunicipality) nat each person signed

(Signature of Circulator)

(Day)

(Year)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Madison, THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING NAME & SIGNATURES OF ELECTORS MUNICIPALITY OF RESIDENCE STREET & NUMBER OR RURAL ROUTE DATE OF SIGNING CO Rural address must also include box or fire no. (Also Indicate Town, City, or Village) 1. Email AN MAnthey □ Town Imm ☐ Village Street: 7545 Widgean Way City Phone 2. ☐ Town □ Village City 3. Email □ Town ☐ Village N. City ☐ Town ☐ Village **好**City Phone (Municipality Name) 5. Email ☐ Town 0<u>11</u>0 (BOS

Print: DAVID 2	CIERATH	- Street: 7513	WIDGE	ON WAY	City	. 4	_ 1	11/16/20
Sign: David	Zwith	_				(Municipality I		(Month) (Day) (Yes
(	J	City: MADIS		zip:53717				
			Certific	ation of Circulat	tor ,	L s A		
I, MARK H (Printed	Name of Circulator)	_, (certify): I reside at((	7635 W Circulator's Res	vidgeon WA7 sidedce - Street Name	and Number)		Circulator Municip	oality)
named in this petition. I kno	w that each person signed	ly obtained each of the signate the paper with full knowledge ion is punishable under S.12	of its content on	the date indicated opposit				
(Month)	$\frac{1}{\text{(Day)}} / \frac{20}{\text{(Y)}}$	ear) (Signa	ure of Circulate	or)		Pa <sub>l</sub>	ge No. (Official Use O	nly)

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Committe PO Box 2

Circulators, Please include your Phone

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

PO Box 2 Madison, THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING NAME & SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE DATE OF SIGNING CO Rural address must also include box or fire no. (Also Indicate Town, City, or Village) Email ☐ Town □ Village City Phone (COR 2. Email □ Town ☐ Village 7549 WIDGEON 11/16/204 City Phone Robert auswerth MADISON (608 MADISON 3. Email ☐ Town ☐ Village City City ☐ Town ☐ Village ☑ City Phone ☐ Town ☐ Village City Phone MADISON Certification of Circulator (certify): I reside at 7635 Widgeon (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under \$12.13(3)(a).

(Month)

(Day)

Page No. (Official Use Only)

Circulators. Please include you

Phone

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Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return b To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Committe

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.				
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CO
1. Print: Richard Stark Sign: Richard Stark	Street: 7433 Farmington City: Madison 21p. 53717	Town Village Dety  MALSM (Municipality Name)	11/16/20 <u>11</u> (Month) (Day) (Year)	Phone (608
2.  Print: ('hristine Tighe  Sim Christine Jigle	Street: 750x Farmington Wy  City: Madison zip: 53717	Town Utillage City  Madison (Municipality Name)	//6/20// (Month) (Day) (Year)	Phone ( 602
3.  Print: MICHAEL R. CLEARY  Sign: MICHAEL R. CLEARY	Street: 6902 WINSTONE DRIVE  City: MADISON ZID: 53711	□ Town □ Village □ (City    MAD   SON   (Municipality Name)	// /16/20 11 (Month) (Day) (Year)	Phone ( &o &
A.  Print: MARK H. EURNS  Sign: Mark H. EURNS	Street: Y635 Widgeon Way  City: MAJISON 21p: 537/7	Town Usiling City  Madid D  (Municipality Name)	17 //6/2011 (Month) (Day) (Year)	Phone ( LO
5. Print: Sign:	Street:  City: Zip:	☐ Town ☐ Village ☐ City  (Municipality Name)	/ /20	Email Phone
	Certification of Circulator	1.1 1		· · · · · · · · · · · · · · · · · · ·
I, Mark H. Eurne . (Printed Name of Circulator)	certify): I reside at 7635 Widgeow WAY (Circulator's Residence - Street Name and Nu	mber) of MAdiSON (Circulator Muni	cipality)	Circulators, Please include yo

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge full is content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under 8.12. 13(3)(4) Wis state.

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

	nstitution and 5.9.10 of the Wisconsin State  FPURPOSES, WHEN DIFFERENT THAN MUNICIPALE		NICIPALITY OF RESIDENCE MUST ALWAY	S BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
David C. Peterson	David Kilm	Street: \$2018 Chamberlander City: Madifm zip: 53726	Town Village Polity M Adison	(Month) (Day) (Year)
· Jesse Schingen	has the	Street: 1701 Norman Way City: Maclison zip: 53705	Town Village Mad (Son	(Month) (Day) (Year)
DANIECHI. VOEKS	Ball des	Street: 305 E LAKEVIEW AUE City: MAPISON WT Zip: 53716	Town Village MOISON	(Month) (Day) (Year)
Harria Kuthara	Duce Putorera	Street: 3733 Timber Line City: Chan Dlams zip: 53528	Town Village Middleton	/    /20  (Month) (Day) (Year)
Nicholaserible	Thurs	Street: 162 H FOR EN WE 207	Town Willage MA OTSON	(Month) (Day) 2011
Paul Marrione	Tall for	street: 1381 Boundary Road  City: Middleton zip: 53560	Town Village Middleton	11 /16/20 11 (Month) (Day) (Year)
Tanya Arenson	Tot	street: 1381 Boundary Road  City: Middleton zip: 53562	Town Village Middleton	// //b /20_11 (Month) (Day) (Year)
Sorah Nelson	2	street: 1615 Maple St. City: Middleton zip: 53562	Town Willage Middleton	/ / / / 20 11 (Month) (Day) (Year)
Kimberly Christensen	Karly Atm	Street: 1927 South Ave City: Middlekin zip: 53562	Town Willage Middle Kin	// /20
0.	137	Street:  City: Zip:	□ Town □ Village □ City	//20(Month) (Day) (Year)
0 10011	Certification of			4.0
Swok C. Softvedt  (Name of Circumally circulated this recall petition and personally obtained the state of the contract of the	lator) ained each of the signatures on this paper. I know that t	ify): I reside at 1034 Waban HII  (Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the residence given. I support this recall petition. I am aware that falsify	e officeholder named in this petition. I know	Municipality) that each person signed

(Day)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Jan
Committee to 1
PO Box 2569

THE MUNICIPALITY U	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Madison, WI 5	
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTAC	
1. Print: 5/LV/A CANTU GMITH SALE SALE SALES	street: 125 Fragale Dr City: Madisson zip: 53705	Town Village Schy  (Municipality Name)		Phone ( )	
Print: Tracqual Smith	Street: 1400 N. Page St.	Town Village City  (Municipality Name)	11 /15/20 <u>//</u> (Month) (Day) (Year)	Email Phone	
3. Print: EMILY KOSS Sign: MAY 45 55	street: 10278 Whitmall Edge CIV  City: FranKIIN zip: 53132	Town Village City  (Municipality Name)	11 /15/20 11 (Month) (Day) (Year)	Phone ( )	
rin: Dennis Reynolds sign: Run Reynolds	Street: 114 S. Franklin St City: Madison zp. 53703	Town Village City  Mach 1-164  (Municipality Name)	(Month) (Day) (Year)	Phone ( )	
5.  Print: MCHAVE FUALU  Sign: MRVau	Street: 6296 ONWARIA TIC  City: OVERON Zip: 53575	☐ Town  OVillage ☐ City  (Municipality Name)	(Month) (Day) (Year)	Email Phone	
I, See Alloto (Printed Name of Circulator), (certify): I reside at HIN W. Br. HING, Lown Made Soin (Circulator's Residence - Street Name and Number)  Certification of Circulator  (Circulator's Residence - Street Name and Number)  Circulator Municipality)  Circulator Municipality)					

(Printed Name of Circulator)	(Circulator's Residence - Street Name and Number	ber) (Circulator Municipality)
named in this petition. I know that each person signed the paper wi recall petition. I am aware that falsifying this certification is punish	ach of the signatures on this paper. I know that the signers are electors the full knowledge of its content on the date indicated opposite his or he able under S.12.13(3)(a), Wis. Stats.	
$\frac{\mathcal{U}_{\text{(Month)}}}{\text{(Month)}} / \frac{15}{\text{(Day)}} / \frac{2077}{\text{(Year)}}$	(Signature of Circulator)	#_1925

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Committee to F PO Box 2569

THE MUNICIPALITY U	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Madison, WI 5
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTAC
1. Print: Group y Stoibor  Stoibor	Street: N65 W/4615 Red wood Drive 53051 City: Manoimore Full 21: 1	Town Village City  (Municipality Name)		Email Phone
Print: Dean Lazenby  Sign: Pen & Japley	Street: 3717 Wilshire In.  City: Madison zp. 53714	Town Village  City  (Municipality Name)	////.5/20 <u>//</u> (Month) (Day) (Year)	Email Ce Que  C A f  Phone  ( )
sign: May Lor	city: Nadison zip: 537/3	Town  Town  City  Municipality Name)	///5 <sup>-</sup> /20// (Month) (Day) (Year)	Phone ( )
4. Print: Andrew M. Hartnett sign andrew M. Northett	street: 6408 Century Ave. #2	Town Village City (Municipality Name)	// //5 <sup>7</sup> /20 <u>//</u> (Month) (Day) (Year)	Phone ( )
5. Print: Audrey J Chase Sign: Audrey Chase		Town Village City  Madiscu (Municipality Name)	// /5 /20 // (Month) (Day) (Year)	Email Phone
I, Sue Alloto (Printed Name of Circulator)	Certification of Circulator  (certify): I reside at 708 (W) Pritting Way  (Circulator's Residence - Street Name and Nu	nP1 Made Sol mber) (Circulator Muni	icipality)	Circulators, Please include your contact

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Janu Committee to I PO Box 2569

THE MUNICIPALITY U	JSED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Madison, WI 5
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT
1. Sul Willinger Sign: Sul Herally	Street: 5/127 Dog word Pl  City: Malism WI 21p. 63705	Town Village MCity MauSon (Municipality Name)		Phone ( )
2. Print: Cardyn Strabel Sign: Coolytural	Street: 601 N. Segua Uni+102  City: Mad, 5 W Zip: 53705	Town Village Deny (Municipality Name)	j ( / 1 5/20 11 (Month) (Day) (Year)	Phone ( )
3.  Print: Carrie Coenen  Sign: Could Corre	Street: 7112 Hickory Run  City: Warunakee zip: 53597	Town Village City  Spring Ste A (Municipality Name)	11/15/20_1\(\text{(Month) (Day)}\) (Year)	Phone ( )
4. Susan Parsons  sign: MI	1310 Jenfer 5+#2 Street: Machin w1 211:53703	Town Village City  (Municipality Name)	// // 2 /20 <u>//</u> (Month) (Day) (Year)	Phone ( )
5. Print: Heather Stocker Sign: Hutte Stee	Certification of Circulator	☐ Town ☐ Village ☐ City  (Municipality Name)		Phone ( )
(Printed Name of Circulator)	Certification of Circulator  (certify): I reside at 108 W. Exitting Number (Circulator's Residence - Street Nume and Number (Circulator's Residence - Street Nume and Number (Circulator))	,	,	Circulators, Please include your contact Phone

recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Year)

(Day)

(Month)

named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by January Committee to R
PO Box 2569

THE MUNICIPALITY U	ISED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS	Y OF RESIDENCE, IS NOT SUFFICIENT. BE LISTED.		Madison, WI 5
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTAC
Signal Baldarotta	street: 641 W. Main St Madicara (3703	Town U.Village City  MadiS6V1  (Municipality Name)	///5720// (Month) (Day) (Year)	Phone
2. Emily Hardiman Sign: Emily Hardiman	street: 437Trailside Dr.  De Forest WI 53532  City: Zip:	Town Willage City (Municipality Name)	/15/20// (Month) (Day) (Year)	Phone ( )
sign: Holly Sloter	Gire Madison WI Zip. 53718	Town Village City  (Municipality Name)	N 15/20 11 (Month) (Day) (Year)	Phone ( )
4. Print: Kovin Larky Sign: July	street: 26 Newbury Cr.  City: Madison Wizp: 33711	Town Village Why  (Municipality Name)	////20 <u>1/</u> (Month) (Day) (Year)	Phone ( )
5. Print: Jeihun Schmitt	Street: 121 Harding At	☐ Town ☐ Village  ▼City  Mud 154  (Municipality Name)	11/15-/20 <u>11</u> (Month) (Day) (Year)	Phone ( )
(Printed Name of Circulator)  I personally circulated this recall petition and personally of	certify): I reside at Circulator's Residence - Street Vame and Nu brained each of the signatures on this paper. I know that the signers are elector paper with full knowledge of its content on the date indicated opposite his or	rs of the jurisdiction or district represented by t	he officeholder	Circulators, Please include your contact Phone

recall petition. I am aware that falsifying this certification is punishable under \$.12.13(3)(a), Wis Stats.

(Signature of Circulator)

(Month)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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		CON	
		Email    Kw 3   Phone    (	
		Phone (	)
		Email Phone	)
		Email	

THE MUNICIPALITY U	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Madison, WI 5
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTAC
1. Linda K. Wells Print: Linda K. Wells	Street: 129 24th Ave  City: // MNO2 ZID: 53566	Town Village Village Village Village (Municipality Name)	(Month) (Day) (Year)	Email  IKW 535  Phone  (103)
Print: Margaret M. Plumer Sign: Margaret M. Plumer	Street: 2730 Tani, Trail City: Fitchbura zip: 53711	Town   Village   City   Fifthburg   (Municipality Name)	1//15/20 (Month) (Day) (Year)	Phone ( )
3. James A. Bolles sign: James U. Polles	street: 5002 Sheboygan Ave #134  city: Madison zip: 53705	Town Village  City  (Municipality Name)	(Month) (Day) (Year)	Phone ( )
Print:	Street: 43 Street: 2101	Town Uyillage Scity (Municipality Name)	// //5/20 // (Month) (Day) (Year)	Phone ( )
5. Lisa M. Mackin. Sign: DM	City: Madison Zip: 53 725	Town Village Mad (Sm (Municipality Name)	////5/20 <u>//</u> (Month) (Day) (Year)	Phone ( )
I, Sue Alioto	Certification of Circulator  (certify): I reside at 708 W BAHNANA  (Circulator's Residence Street Nameland No.		)	Circulators,

(Printed Name of Circulator)	(Circulator's Residence – Street Name <b>j</b> and Numbe	r) (Circulator Municipality)
	each of the signatures on this paper. I know that the signers are electors of ith full knowledge of its content on the date indicated opposite his or her hable under S.12.13(3)(a), Wis. Stats.	
$\frac{\cancel{\text{(Month)}}}{\cancel{\text{(Day)}}} / \frac{\cancel{20}}{\cancel{\text{(Year)}}}$	(Signature of Circulator)	Page No. (Official Use Only)  # 1921

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.

Return by Janu Committee to R PO Box 2569

Madison, WI 53

THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING STREET & NUMBER OR RURAL ROUTE NAME & SIGNATURES OF ELECTORS MUNICIPALITY OF RESIDENCE DATE OF SIGNING CONTACT Rural address must also include box or fire no. (Also Indicate Town, City, or Village) Email we He Smith □,Town Village City Email ☐ Town ☐ Village [] City Phone Email □ Town JANE ANNE MORRIS Z9 E Wilson #205 ☐ Village City 11 /15/2011 Phone (608)25 (Municipality Name) Email □ Town ☐ Village 11 /15/2011 Phone Email □ Town Sillage City Phone Certification\_of (certify): I reside at Circulators, (Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality) Please include your contact Phone I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis Stats. Email Page No. (Official Use Only)

(Month)

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(Year)

(Signature of Circulator)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Jan
Committee to l
PO Box 2569

THE MUNICIPALITY U	ISED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS		:	iviadison, wi
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTAC
1. Maurein (Molly) Plun	CeH 5749 BIHLISWLEFPI.	□ Town □ Village  City	11/15/2011	Huuke
sign: Mouren Dlenttl	City: Madison 21p. 53705	(Municipality Name)	(Month) (Day) (Year)	( )
Print MARY WW KRIBE	Stree2910 KENDALL AVE	☐ Town ☐ Village ÑGity	10-12011	Email
sign: MULLISS	CITY VAD ISO N 249: 53705	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
3. PAUL GRINGSER	inglalliamenal #7	☐ Town ☐ Village		Email
Sign: WOC	Street: 1031 0411101-1301 FIZ	(Municipality Name)	// //5/20// (Month) (Day) (Year)	, Phone
4. Rmild (at	street: 124 White Tail Dr.	Town Usinge Ocity Sus Prance	Wister	Email
sign: Kmard (Ata	Sim Prane 211: 53590	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
5. Matthew Wishler	Street: 721 Glenner St	□ Town □ Village □ City	//	Email
Sign: MWW W	City: Madison zip: 53711	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
. Sue Alisto	Certification of Circulator (certify): I reside at 108 W. Briting Name	PI Madison	1	Circulators,

I personally circul	ated this recall petition a	and personally obtained	each of the signature	s on this paper. I know that the	signers are electors of the jurisdiction	or district represented by the officel	nolder
named in this petit	tion. I know that each pe	rson signed the paper v	vith full knowledge of	f its content on the date indicate	d opposite his or her name. I know the	ir respective residences given. I sup	port this
recall petition. I ar	m aware that falsifying t	his certification is punis	hable under \$.12.13(	3)(a), Wis. Stats.			
//	1 15	/20 //	Sin	(10mt)	! !	Page No. (Official Use Only)	

(Signature of Circulator)

(Circulator's Residence - Street Name and Number)

(Printed Name of Circulator)

(Day)

(Year)

(Month)

#<u>193/</u>

(Circulator Municipality)

Please include your co

Email

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Jan Committee to PO Box 2569

THE MUNICIPALITY U	JSED FOR MAILING PURPOSES, WHEN DIFFERENT THAIN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS	Y OF RESIDENCE, IS NOT SUFFICIENT. BE LISTED.		Madison, WI
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTAC
1. Sue Alicto sign: Sue Ulisto	Street: 708 W. Br. Hills from P1  City: Marly SON 219: 53715	Town Village  City  (Municipality Name)	// /5/20// (Month) (Day) (Year)	Email Phone
Print: Richard Burris	Street: 1320 Fish Heately Roil City: Marchson zip: 53715	Town Village City  (Municipality Name)	11/15/20// (Month) (Day) (Year)	Phone ( )
3. Print: SNSAN PECKER Sign Seeler	Street: 204 IV Man & Lower City: Evansville 21p: 53536	Town U Village City (Municipality Name)	11/15/20// (Month) (Day) (Vear)	Phone ( )
Sign: Dale & HARRISON	Street: 3337 Clove Dai-	Town Village City  MADISOL  (Municipality Name)	/ / /5/20_/_ (Month) (Day) (Year)	Phone ( )
5. Print: LISA BINA Sign: RISCHBURA	Street: 16590 Hay 78  City: Argyle Wl 21:53504	Moreover Town ☐ Village ☐ City  AVG V  (Mulicipality Name)	(Month) (Day) (Year)	Phone ( )
I, Sive Alisto (Printed Name of Circulator)	Certification of Circulator  (certify): I reside at Circulator's Residence - Street Name and Nu	mber) Mails SY (Circulator Muni	cipality)	Circulators, Please include your conta

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indigated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under \$12,13(3)(a), Wis States to

(Month) (Day) (Year)

Phone Email

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by January Committee to I

PO Box 2569
Madison, WI

THE MUNICIPALITY U	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT' THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Madis	son, WI 5
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING		CONTAC
LORA AFROLDE	3741 FeStival Wy	Fown Uvillage City (Municipality Name)	(Month) (Day) (Year)	Phone	
2. Jennifer Stone	street: 9 Woodridge C+ #le	☐ Town ☐ Village  SCity A	11 /15/2011	Emai	
sign:	city: Malison zip: 53704	(Municipality Name)	(Month) (Day) (Year)	Phone (	)
Print: GREG- FRIES	Street: 4374 JULIANA LA	Town	il/15/20_11	Phone	
Sign:	City: DEFOREST Zip: 53532	(Municipality Name)	(Month) (Day) (Year)	(	)
Frin: FREN FRIES Sign foran Fries	Street: 1812 MEADOW DR	☐ Town ☐ Village ☐ City	1/5/201	Emai	
	C1057846472N Z10:53589	Municipality Name)	(Month) (Day) (Year)	Phone (	)
5.	Street:	☐ Town ☐ Village ☐ City	/ /20	Emai	
Sign:	City: Zip:	(Municipality Name)	(Month) (Day) (Year)	Phone (	)
I, Sue Alioto (Printed Name of Circulator)	Certification of Circulator certify): I reside at 108 W. Battus Vanne and Nu	Pl Madiso	<u>M</u>	Circulate	ors,

City	y: Zîp:		
I, Sue Alioto , (certi	ify): I reside at 108 W. Batting Man Pl (Circulator's Residence - Street Jame and Number)	Madison (Circulator Municipality)	Circul Please ir
	ed each of the signatures on this paper. I know that the signers are electors of the just with full knowledge of its content on the date indicated opposite his or her name, hishable under \$12.13(3)(a), Way Stats.  (Signature of Circulator)		Pho En

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Kathy Deneen	Lathy Dereen	street: 210 Indian Summer	Town Marshall	11 /16/2011
		city: Makshall zip: 53555	Li City	(Month) (Day) (Year)
2. ANN Stuech	and although the	City: Madison zip: 53714	Town Usillage City Mad Son	// /6/20 <u>//</u> (Month) (Day) (Year)
3.	10001			, ,
Christopher Krimmer	Clas K	Street: 4/09 Carbiny sho City: Madison zip: 53704	Drown Madis on	(Month) (Day) (Year)
4. JoAnn Sahumacher	Collanglehumarke	Street: 208 SHEDIC Court	Town Sun Prairie	// // /20// (Month) (Day) (Year)
5.	2 11 11	Street: 126 S FFAMUEN STAI	□ Town □ Village	11/16/2011
Louree Holly	Source All	City: MSN 5zp3703	YTown	(Month) (Day) (Year)
DAWA PHUNTS	de Dawa Thursd	2 City: MH DISCIV zip: 53704	City WHDISCN	(Month) (Day) (Year)
Janet Shymway	Sand Shumar	Street: 27/10 Mystle St 1 City: Machi SON zip: 53704	Usillage City Mach Son	
8. Courtreu Homard	Courtney Howard	street: 4318 Driscoll Dr. #2  City: Madison zip: 53718	Town Utillage City  Town	(Month) (Day) (Year)
Gioconda Raminez	2 Sioconda Ramirez	Street: 4334 (Valody 1 1) #3	Town Village SCity  Madison	11 /14 20 11 (Month) (Day) (Year)
Cristina Wood	Cristina Word	Street: 2238 E Johnson # 5	Town Uvillage City  Madison	// //6/20// (Month) (Day) (Year)
CVIDITION TOTOG	000000	city: Madison zip: 53704	10	,, , , , , , , , , , , , , , , , ,
	Certification	A	aA i	
Katherine R. Rhe (Name of Circu	ulator)	tify): I reside at 5.27 Algema St., (Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the		ž
	icated opposite his or her name. I know their respective	residences given. I support this recall petition. I am aware that falsifyi		
11 / 16 /20 1	1 Katherine R. Och	elume	Page No. (0	fficial Use Only)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

THE MUNICIPALITY USED FOR MAILING	G PÜRPOSES, WHEN DIFFERENT THAN MUNICIPAL	JTY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.
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Ary S Armana	Flugell	Street: 5316 Ms/waykee ST  City: Madison, WI Zip: 53714	□ Town □ Village □ City  Madisəx	11 /6 /20 H (Month) (Day) (Year)
lachel D Hanson	Rachel Hanson	Street: VB13 Village Park Dr City: Mad150N Zip: 53718	Town Village Madl8on	\\ \lambda \la
Llana Nash C	Gianalon	Street: 39.25 Ancher Dr City: Madison Zip: 537.14	Town Village Maduson	(Month) (Day) (Year)
Theresa Camacho	Therera Camack	Street: 1021. 2nd St City: Madisa W zip:53714	Town Willage Madison	11 /16/20 <u>(1</u> (Month) (Day) (Year)
LAUREN GRESHAM	Jun hum	Street: 6213 Littlemore Dr #306 City: Madison Zip: 58718	Town Village Padīson	\\ \/ \/ \/ \/ \/ \/ \/ \/ \/ \/ \/ \/ \
Jamie Roehung	famy.	street: 4651 Truchel St City: Madison Zip: 53718	Town Utillage Recity Made & M.	////d/20// (Month) (Day) (Year)
Michaeline Hansen	Michaelm Hunsen	Street: 2408 INDEPENDENCE Ly 108  City: Madison Zip: 53704	Town Willage Madison	//////////////////////////////////////
Hannah Hoff	Hannah Hopb	Street: 1860 Steven St.  City: Sun Prairie zip: 53590	Town Village Sun Prairie	1) // (/20 <u>1/</u> (Month) (Day) (Year)
Jeremy Hayes	MIN	Street: 254 Goeh/ Rd  City: Wafer 100 Wi zip: 53594	Town Village Water/00	// //6/20// (Month) (Day) (Year)
HESS.	Conthat Hoss	Street:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)
	Certification	of Circulator		
Sora A. Arson (Name of Circul		ify): I reside at 1930 E. Douton St. (Circulator's Residence – Street name and	Number) Modison (Circulator)	Municipality)

(Signature of Circulator)

/20h

(Year)

(Day)

(Month)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

Cay: Madison 21/2 53704 PCity MADISON (Menta) (Day) (Year)  Street: 29 S. Herman Tennoll Village madison  Cay: Mischison 21/2 10 Town  Street: 15 N Third 5t Village Madison  Cay: Mischison 21/2 10 Town  Cay: Mischison 21/2 10 Town  Cay: Madison 21/2 5704 City Madison  Cay: Mischison 21/2 10 Town  Cay: Madison 21/2 5 Town  Cay: M
Linda Hill Lund om. ALOU Cos: Madison 216 53704 City Madison 11/15/2011  Nancy HANSOHN Mancy Hansohn Cos: Williage Madison Membro (Day) (Very)  Nancy HANSOHN Mancy Hansohn Cos: Madison 216 53704 City Madison 11/15/2011  Nancy HANSOHN Mancy Hansohn Cos: Madison 216 53704 City Madison (Very)  Nancy HANSOHN Mancy Hansohn Cos: Madison 216 53704 City Madison (Membro (Day) (Very)  Nancy HANSOHN Mancy Hansohn Cos: Madison 216 53704 City Madison (Membro (Day) (Very)  Nancy HANSOHN Mancy Hansohn Cos: Madison 216 53704 City Madison (Membro (Day) (Very)  Nancy Hansohn Cos: Willage Madison (Membro (Day) (Very)  Nancy Hansohn Mancy Hansohn Cos: Madison 216 53704 City Madison (Membro (Day) (Very)  Nancy Hansohn Mancy Hansohn Cos: Madison 216 53704 City Madison (Membro (Day) (Very)  Nancy Hansohn Mancy Hansohn Cos: Madison 216 53704 City Madison (Membro (Day) (Very)  Nancy Hansohn Cos: Willage Madison (Membro (Day) (Very)  Nancy Hansohn Mancy Cos: Madison 216 53704 City Madison (Membro (Day) (Very)  Nancy Hansohn Cos: Mancy Cos: Madison 216 53704 City Madison (Membro (Day) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Madison (Membro (Day) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Madison (Membro (Day) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Madison (Membro (Day) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Madison (Membro (Day) (Very) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Madison (Membro (Day) (Very) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Madison (Membro (Day) (Very) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Madison (Membro (Day) (Very) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Machison (Membro (Day) (Very) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Machison (Membro (Day) (Very) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Machison (Membro (Day) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Machison (Membro (Day) (Very)  Nancy Hansohn Cos: Machison 216 53704 City Machison (Membro (Day) (Very)  Nancy Hansohn Cos: Machison 216 53704 Ci
Sereet: 29 SHERMAN, TENNOUL ON TOWN ON
Fay Mc Clura Say Mc Clura Say Malison WI 21/5 3704 City Madison (North) (Day) (Vear)  Linda Hill Lends on Aill crown Willage Malison Street: 25/4 & Dayton Willage City Malison City: Madison Zip 53704 City Malison Willinge Willin
Linda Hill Lends on Aill City: Madison Zip: 53704  Nancy HANSOHN Mancy Hansohn City: Madison Zip: 53704  Ten Weiland Ten Weiland City: Columbus Zip: 53725  Aneidys lege City: Madison Zip: 53724  Street: 25/4 & DAYton   Town   Village   City: Madison   Village
Nancy HANSOHN Mancy Hansohn City: Madison Zip: 53 7cd City: Madison City: Madison City: Madison Zip: 53 7cd City: Madison City: Columbus Zip: 53925 Columbus City: Madison Zip: 53724 City: Mad
Teri Weiland Teri Weiland Street: W11993 Duffy Rd Town Village City: Columbus zip: 53925 Columbus (Month) (Day) (Year)  Aneidys Rege City: Madison zip53704 City: Madison Zip53704 (Month) (Day) (Year)
Aneidys Reyl midys Regles city: Madison zip33724 City Madison (Month) (Day) (Year)
1) Swantoold 175 wantoold
Alicia Import Street: Tradison 115 Wanting Town   Town   VI /15/2011   Village   VI /15/2011   VI /15/2011   VIII
ORNA BABAD DEVANO Street: 2506 Moland St. Town Village Wad Sov 11/P/2011 City: Madison Zip: W/537864 Madison (Month) (Day) (Year)
Brad Van Donce The Street: 3841 Margacet St Town Village City Mall March (Month) (Day) (Year)
Certification of Circulator  (Name of Circulator)  (Name of Circulator)  (Name of Circulator)  (Circulator)  (Circulator's Residence – Street name and Number)  (Circulator Municipality)  (Circulator Municipality)  (Circulator Municipality)

(Signature of Circulator)

(Day)

(Year)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING	G PURPOSES, WHEN DIFFERENT THAN MUNICIPALI	TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.	
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. Kathryn D. Wilson	Kathyn D. Wilson	Street: 625 Springbrook Circle City: DeForest zip: 53532	□ Town  ★Village □ City  Deforest	////5/20// (Month) (Day) (Year)	Email Phone
Giegory J. Wierz	Lylin	Street: 655 WAShington Pa	Strown Dunkiek	/ 1 / 15 / 20 11 (Month) (Day) (Year)	Phone (
3. ANTON ANDHYA		Street: 942 WINDING WAY  City: MIDDLETON WI Zip: 53562	Town Village Madison	11 /15/2011 (Month) (Day) (Year)	Phone (
*Christina Duare	Meistin Finate	Street: 1402 Regent Street Apt-702 City: Madison WI 21p: 53711	Town Village Madison	11/15/20 <u>11</u> (Month) (Day) (Year)	Email Phone
5. Jon Mayers		Street: 2040 Allen Blvd Apt 2  City: Middleton WI zip: 53562	Drown Village Widdleton		Email Phone
6. Adam Johnson	Rdm J K Jhn	street: 2014 Plke Drhe Apt 7  City: Fitchburg WI zip: 53713	Town Fitch burg, Village Total	11 /15/2011 (Month) (Day) (Year)	Email Phone
7. Amber Schuh	ambre Schl	Street: 402 N. Eau Claire Apt 205 City: Madison WI zip: 53705	Town Village Madison	15/2011 (Month) (Day) (Year)	Email Phone
8. Nicholas George		Street: 324 W. Randolph st City: Stoughton Zip: 53589	Drown Stoughton	11 /15/2011 (Month) (Day) (Year)	Email Phone
9. Joshua Blanchette	You Blanchett	street: 18 S. Onchard St.  City: Madison zip: 53715	Town Village Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
Monica Gavala	Monie Lascle	Street: 5 Loomis Circle # 6 City: Madison Zip: 53704	Town Village Madison	11 /15/2011 (Month) (Day) (Year)	Email Phone
Lisa Lenertz-Lind	Certification of	of Circulator	110000		
LION LEVIEW 12-HIVE	CVIICA , (certi	ify): I reside at 4417 PraineVeW Dr.	<u>Madison</u>		Circulat

Certification of Circulator

I, LISA LANFO Z-LIVACEMEN

(Name of Circulator)

(Name of Circulator)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective jestences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

PRINTED NAMES OF ELECTORS  1. Funita Phan - 2. David A. Brow	SIGNATURES OF ELECTORS  Funta Da	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.  Street: 4833 Sheloo ygan Avc. Apt. 23  City: Madison zip: \$\int_{0}53705\$	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
Funita Phan : David A. Brow 1 3. Sandrak. Wenzel	77		□ Town	, ,
David A. Brow		city: Madison zip: \$\int 53705		11 /15/2011 (Month) (Day) (Year)
	Havida. Bur	Street: 910 Pebble Beach Dv.  City: Madison Zip: 53717	Town Village City  Madison	
3. Sandru K. Wenzel	Such Wh	Street: 4413 Praire Well Dr 53,764 City: Mad 500 Zip:	Town Usillage City Madi	(Month) (Day) (Year)
4.		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)
5.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
6.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)
7.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)
8.		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)
9.	·	Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)
10.		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)

ĺ	·	c	City:	Zip:	(Month) (Day) (Year)
		Certification of	Circulator		
I, _	Lisa Lenertz-Linda	MW, (certify	r): I reside at 4417 PVW	rieview Dr.	<u>Madison</u>
	(Name of Circula	,		ice – Street name and Number)	
I per	sonally circulated this recall petition and personally obta	ined each of the signatures on this paper. I know that the	signers are electors of the jurisdiction or dis	strict represented by the officeholds	er named in this petition. I know that each person signed
		ated opposite his or her name. I know their respective res			
_	(Month) / (Day) / 20 // (Year)	_ Just Jenes	(Signature of Circulator)	<i>y</i>	Page No. (Official Use Only) # 1938
			_	®×******9	ii

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

	enstitution and S.9.10 of the Wisconsin States G Purposes, when different than municipali		TICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.	
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)  DATE OF SIG	GNING
Svegery Worman	(25CM)	Street: 517 North St. City: Madison, WI zip: 53704	Town ///5/2 Village Madison (Month) (Day)	20 <u>//</u>
Kristin L. Larson	Kristin L. Larson	Street: 2874 Moland St City: Madison Wi zip: 53704	□ Town □ Village 1 1	20
Shirley Lacs.	Sheiley Guldel	Street: 2657E Johnson St City: Madeson Wi zip: 53704	Town   1/15/2   1/15/2   City Mad   55   (Month) (Day) (	20 <u>//</u>
Dnyx R.O'Brien	Ony Clas 855	street: 1521 Trailshay #4  City: Madison Wt zip: \$3704	Town Village Mois (Month) (Day)	20 <u>ll</u>
Jenny L Cruban	on June	Street: 3344 BASI Dr City: Maduson zip: 53704	Town Ullage City Maduson (Month) (Day)	2011 (Year)
Angela Bongur	anoplal Brown	city: Cotters by Sunset #B	Town City Cotters (Month) (Day)	20 <u>11</u> (Year)
AlsaSano	alles TSm-	Street: 904 SUNSEL #B	City GWW 1672	20 <u>[[</u>
Brandon Wood	Bu Wood	Street: 2238 E solingon st * 1  City: Madison WI zip: 53704	Town Village City County (Month) (Day)	20 <u>11</u>
Janelle Chinn	KullCh	Street: 2024 purplew DR City: Collin BUS WI zip: 53925	Town Village City (OlUMBUS (Month) (Day)	20 <u>//</u>
Jone Magora	Some Magain	Street: 2641 E. Lawn Ct City: Nacleson zip: 53704	Town Village MODISON (Month) (Day)	
And the second of the second o	lator) ained each of the signatures on this page. I know that the	fy): Provide at Circulator's Residence – Street name an	officeholder named in this petition. I know that each person si	igned

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

article XIII, Section 12 of the Wisconsin Cor	stitution and S.9.10 of the Wisconsin Stat	tutes.	<u> </u>	
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1. Diana Duff	DianaDuff	Street: 4340 Melody La. # 203 City: Madison W. 21p: 53764	Town Village Mades on	// // /201/ (Month) (Day) (Year)
2. Julianne Petersen	TE Petuser	Street: 2042 Myntle St City: Whalison, Wi zip: 53704	Town Village City  Madison	
3. Ann L. Laab	, Al	Street: 1515 Holly Drive  City: Madison & Janesville Zip: WX 4	Town Uvillage SCITUS 46 Janger 110	
4 Kati Brothner	Cat Brother	Street: 1695 Charles ofth Dr City: Syn Praint Whates 53590	Town Village Sainl	111111111111111111111111111111111111
5. Kari Fleming	Kay Thomas	street: 4404 Bucheye Rd  City: Madison zip: 53716	Town Village Mad 1500	
6. John (Newman	John ( Norm)	street: 315 5, henry 5+ \$7 53703	Town Village Mach & Nach	(Month) (Day) (Year)
5 Usan Mautz	Lusan Mant	street: 3138 Clove Drive  City: Madison zip: 53704	Town Village Walson	[
8. Richar Turia	W Pal	Street: 25 Mellyfol- Road  City: M. S. L. Zip: 5374	Town Stillage City  VIVIA	(Month) (Day) (Year)
9. Heldi Heffron-Clark	Heraik Affran Clark	Street: 1385 Kaase Rd City: Stoughton WI zip: 53589	Trown Albian City Albian	11 / 16/20 E (Month) (Day) (Year)
Molly HARROW	mysu	Street: 1430 By Min RAH207 CHAMMAN SMW1 ZIP: 537040	Masm	
Eva Shiffin	Certification , (cert	of Circulator ify): I reside at 109 N 6 486	eet Cityon r	Modison
(Name of Circul sonally circulated this recall petition and personally obtained with full knowledge of its content on the date indicate.)	ator)	(Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the residences given. I support this recall petition. I am aware that falsifyi	d Number)  Officeholder named in this petition. I know the ng this certification is punishable under S.12.	Municipality) nat each person signed 13(3)(a), Wis. Stats.
$\frac{1}{\text{(Month)}}$ / $\frac{1}{\text{(Pox)}}$ / $\frac{20}{\text{(Year)}}$	_ Welling	(Signature of Circulator)	Page No. (0	fficial Use Only)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S 9 10 of the Wisconsin Statutes

1000	onstitution and S.9.10 of the Wisconsin Star	tutes.			
THE MUNICIPALITY USED FOR MAILIN	G PURPOSES, WHEN DIFFERENT THAN MUNICIPAL	JTY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	TICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.	
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. Lisa Wyeth	1 'call with	Street: 55 Craia Aug	Town Madison	11/15/2011	Email
2.	L'accord 211	civi Madison zipi 53705	City City W	(Month) (Day) (Year)	Email
DAN GRAHAM		Street: 501 ROJA RD.	Town Utillage City	(Month) (Day) (Year)	Phone
3.	70	Street: 2338maple Co B COVE	Pa	11 /15/2011	Email
TillixenApsu	nu flico	Street: 2338 marche Gacve	City M Aclisor	(Month) (Day) (Year)	Phone
4!	x Of and	Street: 2534 Scenic Ridge Dr	☐ Town ☐ Village	11 /15/20/1	Email
David Dogenhardt	Dand Diger Karac	city: Madison zip: 537/9	Acity Madison	(Month) (Day) (Year)	Emai
Chris R Carbin	Charles R Colo	Street: 217 Merrill Crist DV	□ Town □ Village  □ City W w d ?	$\sqrt{\frac{15}{20}}$	Phone
Thaddeus	and of the ord	City: M& 150N Zip: 53705 Street 133 LONGINE DR	JCity WAdison	11 /15/2011	Emai
Timm	Simo	City: Madison/53705WI	Uvillage Madison	(Month) (Day) (Year)	Phon
7. Ern feinstein	BANA	street: 7813 Twin flow	Town Utilage Maclisa	11/15/20/1	Emai
	( ) 1	city: Madisa zip: 53719	Getty Malisa	(Month) (Day) (Year)	Phone
mike mills	maps of miles	Street: 4833 - 45/50/64/37	Town Village	11/10/20/11	Phor
9.	Indist I mile	1, 11010000	SCity PADSON	(Month) (Day) (Year)	Emai
Jay M Fleigher	Jag M. Feirsley	City: M & J. Styl W1 Zip: 53705	Town Utillage Voity  Madi Son	$\left  \frac{1}{(Month)} \frac{1}{(Day)} \frac{1}{(Year)} \right $	Phon
0.		4010 511-301.014 010	□ Town	11/12/	Ema
Michael R.JAck	in min dR. Insh	Street: 18/1 SHI DOY BAN AVE 1917 103 Store HADISON Zip: WI	Willage  Solity  MARIO 150/1	(Month) (Day) (Year)	Phor
-	Certification		CITY	f	
Laurence J		tify): I reside at 5 5 5 Mnncu	my st made	/ 5 // //	Ó
(Name of Circu onally circulated this recall petition and personally ob	uction; tained each of the signatures on this paper. I know that	(Circulator's Residence - Street name an the signers are electors of the jurisdiction of district represented by the residences given I support this recall petition. I am away that falsifyi	e officeholder named in this petition. I know the	Municipality) hat each person signed	
er with full knowledge of its content on the date ind	icated opposite his or her name know their respective	residences given I support this recall petition. I am aware that falsifying	ing this certification is punishable under S.12.	13(3)(a), Wis. Stats.	

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

	T	T	VOTING	T
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
G K E G O R Y	hun-	Street: 202 N. Eau Cluve Ave Apt. 201	Town Village Madison	11 /16/2011
TOEFFERWEIN	Joseph .	city: Madison zip: 53705	X City / MAISON	(Month) (Day) (Year)
JUDY KLUG	Doots Kux	Street: 3106 Arresport Ave	□ Town	11/16/2011
	10	City: HAD 156W Zip: 5370A		(Month) (Day) (Year)
) ( ) ( ) ( )	011111	Street: 1817 RAE LAN	☐ Town ☐ Village	11/16/20/1
lober 1 Attskey	Killshar	city: Mf-dison Wi zip:53711	ECity MACISON	(Month) (Day) (Year)
Flajandio Valarquez	11/1/201/1	Street: 344 W. Dayfon St Apt 111	□ Town □ Village	11/16/2011
	My wallen	city: Madison WI zip: 53703	a City Madison	(Month) (Day) (Year)
DIANNE PARISH	Dronent B Ponn	Street: 1021 PARK ST	Town STOUGHTON	11/16/2011
		City: 5 100611701 W1 zip: 53389	City 1000111	(Month) (Day) (Year)
Toyce Runey	Joyce Rimay	5509 Belin St	☐ Town ☐ Village	17/16/2011
, ,	<u>'</u>	chymadison, uTzip: 53705	City Mad15611	(Month) (Day) (Year)
)	00000	Street: 4913 Terminal Dr	□ Town □ Village	10/16/2011
ariua Becker	Pateria & Beller	city: Mc top land 21p: 53558	City Mc Farland	(Month) (Day) (Year)
7-10-10-11-10	Qualle De	Street: 502 Merrill Crest Dr	Town Village  City  Mad 150	11/16/2011
Doug Wesolowski	- mymesme	City: Mad 150n zip: 53705		(Month) (Day) (Year)
11. No	A MARIAN	street: 4817 Shebayaan All	□ Town □ Village □ A A A	11 /16/2011
Jangelle Delennis	SINGLID	city: Madison WI zip: 53705	Acity Madron	(Month) (Day) (Year)
		Street: 315 W DOTG St Apt3	□ Town □ Village	11/16/20/1
AMERON SMITH		city: Madison WI zip: 53703		(Month) (Day) (Year)
anrence J. L	-onden Certification	5525 Maria	ai se mal	11500
(Name of Circi	, (certi	tify): I reside at(Circulator's Residence – Street name and		

(Month)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUNICIPALI	TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.	Mad
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1.	lea	Street: 4636 CONUSTOLA TUL	▼Town Uvillage	11/15/2011	Email
STEVE WELSCH		City: COTTAGE CROVE "Zip: 53527	City COTTAGE GLOS	(Month) (Day) (Year)	Email ( )
2 Katelia NIELSOA	Kathe AM	Street: SS14 Quarry HIII Dr. City: FHChura ZID: S3711	Town Village FACbura	(Month) (Day) (Year)	Phone
3. Shawn Weber	Shanwelen	Street: 212 Bordner	Town Village Mad156N	)\ /15/2011 (Month) (Day) (Year)	Email Phone
M cMahon	Workiller	City: Mad150N zip: 53705	• • • • • • • • • • • • • • • • • • • •	(Month) (Day) (Year)	Email ( )
4. Catherine L Buege	Cadherine Duege	Street: 625 N. Segae Rd #805  City: Madison zip: 53705	UTown Village Weity Madison	11 /15/20_11 (Month) (Day) (Year)	Phone ( )
5. JOHN R.	Ol Doller	Street: 6422 ENTERPRISE LN 2B	□ Town □ Village	11/15/2011	Email
DUDLEY	Sommer Asset	City: MADISON Zip: 53719		(Month) (Day) (Year)	Phone ( )
6. DIANE ADAMS	Diene alams	Street: 5706 An chorage Ave.	□ Town □ Village	11 /15/2011	Email
	100000000000000000000000000000000000000	City: Madeson zip: 53705	City Madeson	(Month) (Day) (Year)	Phone ( )
7. MINTIN GOVERN	Mari Dh	Street: 1705 CAMELOT DR.	□ Town □ Vidage	11/15/2011	Email
GLORIA GREEN	Gloria Green	City: MADISON Zip: 63704	Ticity MADISON	(Month) (Day) (Year)	Phone ( )
8.		Street: 5002 Neboggar Ave #160	□ Town □ Village	11 /16/2011	Email
Eir Burke	him hohe	cty: Madiso Zip: 53705	City MLL	(Month) (Day) (Year)	Phone ( )
9.	·	Street:	□Town	/ /20	Email
		City: Zip:	☐ Village ☐ City	(Month) (Day) (Year)	Phone ( )
10.		Street:	□Town	/ /20	Email
		City: Zip:	☐ Village ☐ City	(Month) (Day) (Year)	Phone

			City: // // // // // // // // // // // // //	Zip: 90 100	MINTION		
	8. Err Burke	air hele	Street: 5002 Ohelo	Jan Ave #160 Zip: 53705	□ Town □ Village □ City	11 /16 /2011 (Month) (Day) (Year)	Phone ( )
	9.		Street: City:	Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)	Email Phone
٠	10.		Street:	Zip:	□ Town □ Village □ City	/ /20(Month) (Day) (Year)	Email Phone ( )
I,	3+ephanie (Name of Circ	J. Lowden	tion of Circulator _, (certify): I reside at	5 Marce esidence - Street name and	1 St Circulator (Circulator	HJOMON S Municipality)	Circulators, pl
I per the p	rsonally circulated this recall petition and personally of paper with full knowledge of its content on the date inc.  (Month)  (Day)  / 20  (Year)	ndicated opposite his or her name it know their res	ow that the signers are electors of the jurisdiction	or district represented by the	officeholder named in this petition. I knowng this certification is punishable under S.1	that each person signed 2.13(3)(a), Wis. Stats.  (Official Use Only)	Email
	·			9	·		

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

Article XIII, Section 12 of the Wisconsin Con	nstitution and S.9.10 of the Wisconsin State	utes.			
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1. Ebony Clayborne	Ehr Of	Street: 806 Brandie Rd #1 City: Madi Son, WI zip: 53714	Town Uillage Wadison	// //5/20/( (Month) (Day) (Year)	Email Phone
2. Heather Sml	2 Heathe Shit	street: 819 Bradel Rd  City: Mad/Son W zip 53114	Town MGASA	(Month) (Day) (Year)	Email Phone
3. Daniel Sannes	Sulskyden	Street: 923 Brandir rd City: Madison Zip: 53714	Town Village Madison	// //5/20// (Month) (Day) (Year)	Email Phone
MARK SSANNES	MarkSannes	Street: 823 Brondie 53714 City: MADISON Zip:	Town Village MADISON	// // 5/20 // (Month) (Day) (Year)	Phone (
Raechel Kosell	Revelul lessel	Street: 4326 Nakosa Traj H2 City: Madison Zip: 53714	Town Village Mad Son	11 /15/20 <u>11</u> (Month) (Day) (Year)	Phone (Email
Regina 7.0Live	Regin 7. Oliver	Street: 432 6 Nakoosa 12 FH City: Madison zip: 53714	Town Village Vad'Son	(Month) (Day) (Year)	Phone (
Julie Henze	Julie Henrye	Street: Medison Zip: 53714	Town Village Mad ( SON	1(//920 <u>1</u> (Month) (Day) (Year)	Email Phone
*. Twonnathod	Lumm Wood	Street: 4326 NAKOOS2 City: MAUSON	Town On SOn	1 /15 20 <u>l l</u> (Month) (Day) (Year)	Email Phone
STEATH VICKERS	the Wit	Street: 4326 Nakousa #8 City Madison 21p: 53114	Town Village Wasis 6 7	(Month) (Day) (Year)	Email Phone
Jaymee Meier	Chima Mais	street: 5222 Kidge DAK Dr City: Madison zip: 53704	Town Usuage City  Madison	11 /15/2011	Email Phone
1	Certification	of Circulator	T 0/1 1.		
Name of Circul		ify): I reside at 5222 Kidse On K (Circulator's Residence) - Street name and	Dr. Wadiso 1 Number) (Circulator N		Circula
personally circulated this recall petition and personally obtain	ained each of the signatures on this paper. I know that t	the signers are electors of the junisdiction or district represented by the residences given. I support this recall petition. I am aware that falsifying	officeholder named in this petition. I know the	nat each person signed	P
11 , 15 ,20 11	_ Minhe	- Meed	Page No. (0	fficial Use Only)	E
(Month) (Doy) (Voor)	/1 `   1	(Signature of Circulator)	1 1(34	U i	

(Year)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S 9.10 of the Wisconsin Statutes.

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1. Vicki Lmathian	Mishiph	street: 5425 Penny Lune City: machison zip: 33718	Town Wachson	// /5 20 1/ (Month) (Day) (Year)
Jean Mathison	Lean Mathison	City: Madesian zip 53716	□ Town □ Village □ City Modesisn	// /5/20/L (Month) (Day) (Year)
Donald A. Hebgen	Jonald Lebyer	steel 702 Meredithe	Town Utillage City	11 15/20 11 (Month) (Day) (Year)
JIM FEIFAREK	In Fife	Street: 4706 MEREDITHE A City: MAOISON Zip: 53716	Town WADISON	(Month) (Day) (Year)
5. Sally Fortney	Sally & Fortney	Street: 4706 Merodithe Ave Outs: Madison zip: 53116	Town Village Madison	
6. Christie Zamber	Christalander	street: 4710 Meredithe Are city: Madison zip: 53716	Town Village Madison	(Month) (Day) (Year)
7. Brad Henke	hal the	Street: 4817 Ferris Ave City: Madison zip: 53716	Town Village Mad. Sur	i//5720_i/ (Month) (Day) (Year)
8. Tevesa Fosdick	Sun Horn	street: 4821 Ferris Avc City: Madison zip: 53716	Town Village City Mû di Son	\(\lambda \lambda \frac{\frac{1}{5}}{20\ldot\ldot\ldot\(\text{Nonth}\)\(\text{(Year)}\)
" RUFH POOCHIBIAN	Ruth Poorling	Street: 4717 FERRIS AVE City: MADISON Zip: 53714	Town Village City	(1 /15/20 11 (Month) (Day) (Year)
EAROL McCLATCH	Ey Carol Mc Caletie	Street 7713 FERNIS AND City: MADISON, WI Zip. 53716	Town Uvillage ACity  ADJ SON	(1 /1 5 / 20 11 (Month) (Day) (Year)
Sonally circulated this recall petition and personally ob	ulator) tained each of the signatures on this paper. I know that	of Circulator  ify): I reside at 5222 K. G. E. D. t.  (Circulator's Residence Street name and the signers are electors of the jurisdiction or district represented by the	Madisar d Number) (Circulator N cofficeholder named in this petition. I know the	nat each person signed
paper with full knowledge of its content on the date indi	cated opposite his/or her name. I know their respective	residences given. I support this recall petition. I am aware that falsifyi	,	13(3)(a), W1s. Stats.

(Signature of Circulator)

(Month)

(Day)

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Kayla Othoughnessy	Kayla OSa	Street: 4713 Ferris Ave City: Madison Zip: 53716	Town Village RCity Madison	11/15/20
MEAGE MCLATCHIE	Mendal tales	Street: 4713 FERRIS AUE City: MADISON Zip: 53716	Town Utillage City  MADISON	// //5/20 <u>/ (Month) (Day) (Year)</u>
Larla Stephani	laria Sturbani	Street: 4502 Derwood Dr City: Madison Zip: 5371/2	Town Village City  MMUSON	///5/20// (Month) (Day) (Year)
3 John Hanson	5 gill Hanson	street 4502 Deenwood De	Town Village Party Madison	// //5/20 <u>//</u> (Month) (Day) (Year)
Roper Voits	Ralles	Street: 4710 Ferry Ave City: MadiJan WI zip: 53716	Town Utillage City  Mad. Jon	// /5/20// (Month) (Day) (Year)
MARY LON CONDON	mary Lou london	Street: 1226 MEADOWLARK DR City: MADISON WI Zip: 53716	Town Village City  MATO ISON	/5 20 <u> </u>  (Month) (Day) (Year)
Frances Ramsey	Faces Ram	street: 4614 Ferris Ave	Town WAD 150N	// //5/20
James Ramsey	H	street: 4614 Ferri's Ave city: Mad 150 N, W1 zip: 53716	Town Village MADISON City	11 /15/20 <u>11</u> (Month) (Day) (Year)
Janis L. Wenman	Janes L. Wonner	Street: 2536 Florence City: Bd61+ Zip: 53511	Trown   Village   Belor +	/15/20/1
ANN Joachim	Ann Joachi	Street: 4701 Ferry Ove City: Madison Zip: 537/6	Town Utillage Madison	// //5/20// (Month) (Day) (Year)
Jay Mee Mei (Name of Circui	lator)	ify): I reside at 5272 Kide Dule (Circulator's Residence Street name and	Dr. Madis (Circulator M	(Junicipality)
ally circulated this recall petition and personally obtr with full knowledge of its content on the date indic	ained each of the afgnatules on this paper. I know that to	the signers are electors of the jurisdiction or district represented by the residences given, I support this recall petition. I am aware that falsifying	officeholder named in this petition. I know the ng this certification is punishable under S.12.1	at each person signed 13(3)(a), Wis. Stats.

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1.	0 VO-1-	Street: 4701 FERRIS AV	☐ Town ☐ Village	11/15/2011	imail Phone
JAMES V. JOACHIM	James V Jouenn	City:MADISONW Zip:537/6	ACity MAD 150N	(Month) (Day) (Year)	mone ( Email
James T Jafferis	The Talle	Street: 4606 Ferris Ave	Town Village Maclison	11 15 2011 Pt	hone
3.	comes pupera	city: MAdison zip: 53716		Er	Email
MAPILYAL A TAKERPA	Moules A Carlins	Street: 4606 FERRIS AVE City: MAPISON Zip: 53716	Town Village AP 150N	(Month) (Day) (Year)	hone
4.		41.00 FERRITE AVE	□ Town		Email
Alexander BHER	Alekal in but	City: MADISON Zip: 53716	Village MADISON	(Month) (Day) (Year)	hone
5.	C		Town Village MAO (500)	n/15/2011 L	imail
HAUL A. JCHIRO	Law Schro	City: // NOLOLO Zip: 4855 // 6	City	(Month) (Day) (Year)	hone
6. Call Alace Cale	idola Rolling buil	Street: 1101 Acewood Blvd	☐ Town ☐ Village		email Phone
Maka J. Welober Jehiro	TWO SCHOOL SCHUIS	city: Madison, WI zip: 53716	*City Madison	(Month) (Day) (Year)	
7.		Street: AODLA' OMOTE Drive	☐ Town ☐ Village ▲	1 1/15/2011	Email
Michael Murtinez	mimal morning	CHY! MADISIN WI 532!!	MCity Madison	(Month) (Day) (Year)	hone
8.		Street: 1113 A < QWEDD BIND	☐ Town ☐ Yillage	11 /15/2011	Email
Harlindh Shade	Fulit L Shale	City: Madison zip: 53716	Madigon	(Month) (Day) (Year)	Phone
9.	1.1.00	Street: 1/18 ACC WOOL BLUCK	□ Town □ Village	1/15/2016	email Phone
LESNG OMTH	JAM SMA	City: Mad SON Zip: 537/6	City MACISIN	(Month) (Day) (Year)	
10.		street: 4710 Meredothe Are	□ Town □ Village	11/15/2011	Phone
Jeny O Camber	- framen	City: Madican WI. zip: 53716	HOLLY MA dism	(Month) (Day) (Year)	
Jaymon Meie	Certification of	1222 VII 10 VI	Dr Madica	4	
(Name of Circui	lator)	ffy): I reside at 1220, 100 at 100 circulator's Residence – Street name and			Cir
personally circulated this recall petition and personally obta e paper with full knowledge of its content on the date indic	ained each of the signatures on this paper. I know that the cated opposite his or her name. I know their respective i	he signers are electors of the jurisdiction or district represented by the esidences given. I support this recall petition. I am aware that falsifyi	officeholder named in this petition. I know th ng this certification is punishable under S.12.1	at each person signed .3(3)(a), Wis. Stats.	
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1. Natasha	MATH	street: 815 Blandie Rd.	Town Village Walson	11 // \$2d_(	En Ph
Stankarich		city: Madison, zip: 537/4	excity Madison	(Month) (Day) (Year)	En
TOUT		Street: 7/3 Brandie 2 S	Town Village City	(Month) (Day) (Year)	Ph
Vim Denrely		city: Mord 200 zip 53704	1.1001130VI.	(Month) (Day) (Teal)	En
Michelle Loeffler	I Laffer	city: Madism zip: 53714	Town Village Society  Madison	////5/20_// (Month) (Day) (Year)	Ph
· · · · · ·		Street: SO9 Brandie	Town	1(/(5/20((	Er
Tom Nier	V cotte	city: Mand is an zip: 53714	Village / Was i'SON	(Month) (Day) (Year)	Ph
> 1 Trunk	7ach	street: 803 Brandie	□ Town □ Village 100	11 /15/2011	Ei Pi
Luch Irmsne		City: Mad Son zip: 53714	Utiliage Madson	(Month) (Day) (Year)	E
711/2 11/1	TO AMOUR	Street: 203 Roulie Pl	□ Town □ Village City	$\frac{1}{(Month)(Day)} \frac{1}{(Year)}$	Pl
Mus UMM (e)	THE COURT	City: Mad Son 21p: 53714	TOWN 130	(ivioliti) (Day) (Teal)	E
Tanochirmer	pradium	Street: DaBaron C #3	Village City O SO	(Month) (Day) (Year)	Pl
(6)		Street: 806 Brandie 925	□ Town	11 / K/2d1	E
Tiftay McAdori	Tuffy Midy	city: Madison WF zip: 53714	Dyillage City Mad. Son	(Month) (Day) (Year)	Pi
Varian Fortman	Morean Josepha	street: 804 brandie #3	D Town U Village XCity	11/15/201	Pi
	Nous Co Co Co Co	City:	*City Wedison	(Month) (Day) (Year)	
Michael Hock!	Willout Strock	Merren 406 Brandie #2	Town Usullage ACity Mad 1307	// /5/20 <u>//</u> (Month) (Day) (Year)	Eı Pl
- mult	Contidention	city: Madison zip: 53714		(real)	
Jaymer Meier	2 -	of Circulator rtify): I reside at 5222 Ridge D	KD. Madi	SON	
(Name of Circu	llator)	(Circulator's Residence - Street name and	d Number) (Circulator N	Aunicipality)	
	icated opposite his or her name. I know their respective	t the signers are electors of the jurisdiction or district represented by the g residences given I support this recall petition. I am aware that falsifyi			
1 , 15 ,2011	1 Mme 1	(121)	Don Me to		

(Signature of Circulator)

(Month)

(Day)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.					]
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1.	0,00000000	Street: 2113 Lake Point DrApt 1	□ Town □ Village  City  CIC \ S\	11/10/2011 (Month) (Day) (Year)	Email Phone
Panles Miller	Oshles Miller	city: Mach SON W1 zip: 53713			Email (
Christopher Burch	Claps Burch	street: 421 Maywood St City: Madison W1 zip: 53704	□ Town □ Village ☑ City Madison	11/16/20 <u>11</u> (Month) (Day) (Year)	Phone (
3. Patricia Epstein	Ark The	street: 7712 Hillorest Ave City: Middleton zip: 53562	Town City of Octive Middleton	// // /20 // (Month) (Day) (Year)	Email Phone
4. Sean Mazayhlin	Sentler	street: 6201 Davenport Drive  City: Madign zip: 53711	Town Utillage DCity  Madison	(Month) (Day) (Year)	Email Phone
5. Gabe Rosen	The Ren	street: SIS IN Lake St. City: Majun zip: 57703	Town Village City  Mad, Jon	11 /16 /20 11 (Month) (Day) (Year)	Email Phone
6. ANNE E COLEMAN 7.	Anna & Cal	Street: 2018 GREENINGY CROSS #1 City: FITCHBURL W1 Zip: 53713	□ Town □ Village  parcity  F17C+FBuf6	i ( /16/20_1/ (Month) (Day) (Year)	Email Phone
7. Harole Dachelet	A	Street: 159 Lakewood Gardens Ln  City: Madison W1 zip: 53704	Trown Madisem	11 /14/20/1	Email Phone
8. RUNNI HAYON	In Hen	Street: 1910 REETZ RD  City: MADISON Zip: 53711	Town Utilage City  Town	11 /16/20_11 (Month) (Day) (Year)	Email Phone
Dannis GansherT	Kurkmetanne	Street: 162 W. Prospect 5+ City: Stoughton, W. zip: 53589	Town Villa Stone hton	11 /16/2011 (Month) (Day) (Year)	Phone (
10. MATTHEW FANDLE	Margas	Street: 1829 HEATTH AVE  City: MAD 150N Zip: 53704	Town Village MADISON	\	Email Phone
Certification of Circulator					
KONG KASPA (certify): I reside at 3809 ANCHOR DR MADISON WI					

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

Article XIII, Section 12 of the Wisconsin Con	nstitution and S.9.10 of the Wisconsin Stati	utes.			
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. Sthat Frazier		street: 835 WDoylar Stipot  City: Madison, WI zip. 53706	Town Willage Madis ov	1\ \/16\/20\1\ (Month) (Day) (Year)	Email Phone
2. ANGELA ZAR	Julia Millen Ein	Street: 748 JENIFER ST #1 City: MANBON zip: 53703	Town Village City WA PISON	(Month) (Day) (Year)	Email Phone
3. Sarah Germonprez	5	Street: 641 E Day for St.  City: Machison zip: 53703	Town Village PCity MAISON	// 16/20// (Month) (Day) (Year)	Email Phone
Robert Patorson	Robert Peters	Street: 7015 PARKSIDE CILL City: Da Forcest zip: 53532	Drown Uillage City WINDSCIR	(Month) (Day) (Year)	Phone (
Leslie Shalabi	heslie Shalibi	Street: 6167 Dell DR #1  City: Madison WI zip: 53718	Town Village Recity Madison	(1 /16 /20	Phone (
Brent Christianson	Brut Christian	Street: 2610 Park Pl City: Mudison Zip: 53705	Town Village Madison	(Month) (Day) (Year)	Email Phone
Steven Schaeter	Nath	Street: 110 lean Street City: Mali Son zip: 53714	Town Utillage PCity Mc DI Say	// //6/20 <u>//</u> (Month) (Day) (Year)	Email Phone
8. Terence A. Murphy	Term a Mary	Street: 1967 & Main #2  City: Madison W1 zip: 53704	Town Village Wali Sov	(Month) (Day) (Year)	Email Phone (
E. Brankyn Bur	E. Bizen	Street: 5321111011110011100000000000000000000000	Town Village City    City     City	(Month) (Day) (Year)	Email Phone
Ellen Utter	Ellen Litter	street: 33 Joshua Circle City: Madison Wi zip53714	Town Village Midson	// /6/20/// (Month) (Day) (Year)	Email Phone
Certification of Circulator					
KOBERT A. KASPAR, (certify): I reside at 3809 ANOMEDR MADISON WI				Circul	
(Name of Circul	ator)	(Circulator's Residence - Street name an	d Number) (Circulator 1	Municipality)	Circui

I, I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Month) (Day) (Year)